

THE SOUTHALL-NORWOOD
URBAN DISTRICT COUNCIL.

Annual Report

OF THE

Medical Officer of Health

For the Year 1913.

Southall-Norwood Urban District Council.

1913.

MR. G. S. WEST, J.P., *Chairman.*

MR. J. J. WILSON, *Vice-Chairman.*

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„ T. A. JUDD.

MR. G. STANDLEY.

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„ J. H. WILLIS.

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„ H. E. BURWELL, *Clerk's Assistant and Accountant Clerk.*

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„ J. B. THOMSON, A.M.Inst.C.E., M.R.S.I., *Assistant Surveyor.*

„ J. D. WINDLE, M.D., Ch.B., M.R.C.S.,
Medical Officer of Health.

„ J. WOOD, Cert. San. Inst., M.S.I.A., *Inspector.*

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MR. W. L. COLTMAN, *Librarian.*

Annual Report

OF THE

Medical Officer of Health

FOR 1913.

To the Members of the Southall-Norwood Urban District Council.

MR. CHAIRMAN AND GENTLEMEN,

I have pleasure in submitting my Annual Report on the vital statistics and sanitary administration for your district during the year 1913. On the whole the health conditions for the year were satisfactory. The increase in the death-rate of 1·8 per 1,000 does not represent a proportionately higher morbidity in the district, since the higher death-rate has been brought about largely by excess of deaths during the year of persons dying outside the district, but belonging statistically to our population. For a working-class population the average death-rate for recent years is an unusually low one, and, as I have said in many previous reports, it is within our power to reduce it still further by measures directed to minimising the incidence of infantile sickness. If the rate of infant mortality were reduced to the rate of about 70 to 80 per 1,000—which is what it ought to be in a healthy district like yours—the effect on the general death-rate would be to make it one of the lowest in the County for an artisan population.

The Middlesex County Council have under consideration the question of administering the Notification of Births Act. I hope your Council will see its way to support this measure, and thereby bring about the appointment of health visitors for the district, whose work in connection with infantile sickness would doubtless prove of the highest value in minimising the incidence of morbidity and mortality.

As regards the general sanitary circumstances of the district they are in every way satisfactory, and Southall has earned a well-deserved reputation as being a particularly healthy place. The air is very pure, the soil dry, and the water supply ample and of good quality. The disposal of refuse is efficiently carried out as regards sewerage, house refuse, and cleansing of streets.

The means provided for isolation of notifiable diseases and for disinfection are satisfactory in all respects.

Your Sanitary Officers exercise constant supervision to ensure the purity and wholesomeness of the food supply, the slaughter-houses, butchers' shops, dairies, milk shops, and bakehouses being systematically inspected.

I beg to thank the Council and Officers for their support in my work, and to express my indebtedness to my colleagues for statistical and other information embodied in this report relating to their several departments.

I am, Gentlemen,

Your obedient servant,

J. D. WINDLE.

SECTION I.

SANITARY AREA.

The Urban District of Southall-Norwood is situated on the main road from London to Oxford, $9\frac{1}{4}$ miles from the Marble Arch, $5\frac{1}{2}$ miles south-east of Uxbridge, and 4 miles north-west of Brentford, the County Town.

The area of the district is 2,575 statute acres—2,525 acres of land and 50 acres of water.

The soil is gravel, with occasional outcrops of brick earth.

The length of the district from north to south is 2 miles 4 furlongs 86 yards, and the breadth from Bull's Bridge to the Sewage Disposal Works 3 miles 0 furlongs 203 yards, the narrowest parts being at the extreme northern end of the district, which is 2 furlongs 210 yards.

The highest point above Trinity high-water mark is on the Southall Station Bridge, which is 115·5 feet, and the lowest point at the Sewage Disposal Works, which is 21·5 feet above such level.

The total length of public roads is about $15\frac{1}{4}$ miles.

Two streets were taken over by the Council during the year. The mileage of private roads in the district is about 6 miles. No plans for new roads have been passed since the last report.

PUBLIC OPEN SPACES.

Norwood Green	...	...	...	...	8
Recreation Ground (Southall Green)	...			...	11
Southall Park	...	...	...	...	$14\frac{1}{2}$

acquired by the Council in 1908, at a total cost of £9,776 12s. 6d., towards which the Middlesex County Council contributed £2,285.

During 1911 the Council purchased a further portion of Southall

Park, about 10 acres, and additional land of about 7 acres was acquired for extension of the Recreation Ground on the south side.

Manor House.

In 1913 the Council purchased the old Manor House in the heart of Southall. Certain parts of the frontage will be utilised for making a much-needed road improvement, and the house and grounds will be utilised for recreation and other purposes. The house is a fine old example of half-timber work erected in the sixteenth century, and the grounds are well matured and will form a great acquisition to the open spaces of the district.

WARDS.

For administrative purposes the district is divided into East and West Wards.

The division of the Wards is an imaginary line, which begins in the centre of the road outside Waxlow Farm entrance, down North Road to Uxbridge Road, thence to the "Three Horseshoes" Beerhouse, down South Road, over Station Bridge, and on by St. John's Church, along Western Road, by "Halfway House" Beerhouse, and on until opposite the "Prince of Wales," where the line leaves the road and goes to rear of the two cottages opposite, and again joins the road immediately after passing over Canal Bridge, and thence on to Watersplash.

All to the left of the line is East Ward, and all to the right West Ward.

POPULATION.

The official census of the district was taken in April, 1911. The following are the particulars of the enumeration. The totals include the inmates of institutions, viz., Hanwell Asylum, 2,801; and St. Marylebone Schools, 309 :—

Ward.	Separate Occupiers.	Population.
East	2,047	12,561
West	2,807	13,762
Total	4,854	26,323

Estimated population for the middle of the year 1913, 26,736.

In estimating the population for the statistical purposes of this report I have, as in previous years, entirely excluded the inmates of the London County Asylum, the population of which is dealt with as a separate district. The inmates of the St. Marylebone Schools are included in the population of the district. At the middle of 1913 the total number of houses on the rate-book was 5,284 ; in the East Ward, 2,216 ; in the West Ward, 3,068. Multiplying these figures by 5 (the probable number of inmates in each house) we get 26,736, the total population for the district. That for the East Ward, 11,080 ; for the West Ward, 15,656.

The population of Hanwell Asylum is 2,763 ; St. Marylebone Schools, 316.

Social Condition.—The greater proportion of the houses in the district are occupied by good-class working people, who are chiefly engaged in the factories established in the district within the last few years.

Poor Law Relief.—I have no official information as to the amount of Poor Law relief in the district, but from my own knowledge I should say it is less than would be expected in a working-class neighbourhood.

Hospital Accommodation.—There is no hospital accommodation in the district for cases of accident or ordinary sickness ; for serious cases of injury or disease requiring operation we have to depend on the London Hospitals. A Nursing Association has been instituted in the district, and two trained nurses provided for the gratuitous nursing of the sick poor in their own homes. They have proved a great boon to the district ; there is, however, sufficient work to employ at least four nurses. I have urged upon the Council the desirability of appointing a lady health visitor for the district, to deal especially with the summer ailments of infants and young children. This matter is at present under consideration, and it is hoped that such an officer will be appointed under the Notification of Births Acts, which will probably be administered under the County Council.

HOUSES IN RATING—COMPARATIVE TABLE.

	Total.	East.	West.
HOUSES IN RATING			
end of December, 1905	3772	1619	2153
NEW HOUSES :			
January to June, 1906	213	41	172
Total	3985	1660	2325
NEW HOUSES :			
June to December, 1906	203	43	160
Total	4188	1703	2485
NEW HOUSES :			
January to June, 1907	125	50	75
Total	4312	1753	2560
NEW HOUSES :			
June to December, 1907	71	32	39
Total	4384	1785	2599
NEW HOUSES :			
January to June, 1908	61	29	32
Total	4445	1814	2631
NEW HOUSES :			
June to December, 1908	58	26	32
Total	4503	1840	2663
NEW HOUSES :			
January to June, 1909	81	40	41
Total	4584	1880	2704
NEW HOUSES :			
June to December, 1909	159	65	93
Total	4743	1946	2797
NEW HOUSES :			
January to June, 1910	100	68	32
Total	4843	2014	2829
NEW HOUSES :			
June to December, 1910	91	65	26
Total	4934	2079	2855
NEW HOUSES :			
January to June, 1911	71	12	59
June to December, 1911	53	17	36
Total	5058	2108	2950
NEW HOUSES :			
January to June, 1912	114	56	58
June to December, 1912	69	34	35
Total	5241	2198	3043
NEW HOUSES :			
January to June, 1913	43	18	25
June to December, 1913	20	8	12
Total	5304	2224	3080

Estimated Population.—Comparative Table to Middle of Year.

	Census 1891.	Census 1901.	East.	West.	Estimated to June, 1903.			Estimated to June, 1904.			Estimated to June, 1905.			Estimated to June, 1906.			Estimated to June, 1907.			Estimated to June, 1908.			Estimated to June, 1909.			Estimated to June, 1910.			Census 1911. Whole District.	East.	West.	Estimated to June, 1912.			Estimated to June, 1913.		
						East.	West.		East.	West.		East.	West.		East.	West.	Whle Dist.	East.	West.	Whle Dist.	East.	West.		East.	West.	Whle Dist.	East.	West.				Whle Dist.	East.	West.	Whle Dist.	East.	West.
Southall- Norwood ...	5188	9953	4516	5337	13832	6225	7195	15325	7025	8300	17300	7870	6430	18365	8075	10290	20940	8515	12425	22000	9000	13000	22920	9400	13520	24000	9790	13895	23522	9760	13411	25860	10820	15040	26736	11080	15656
St. Marylebone Schools ...	335	—	—	412	—	—	412	—	—	412	—	—	412	—	—	412	412	—	412	—	—	371	—	—	371	—	—	345	—	—	—	—	—	309	—	—	316
Total ..	5513	10,365			14,244			15,737			17,712			18,777			21,352			22,371			23,291			24,000			23,522			25,860			26,736		

As a matter of interest and following the practice of previous years, I show in the subjoined table an estimate of the total population of the District at the end of the year 1913, calculated from the number of houses on the Rate Book at that time.

Estimated Total Population, including Institutions, at End of Year, 1913 : 29,599.

From January to the end of December 63 houses were brought into rating ; the total number of houses on the rate book at that time was as follows :—

End of December, 1913.		Total.	East Ward.	West Ward.
Houses on Rate Book	...	5304	2224	3080

This gives an approximate population of 26,520. To this must be added the inmates of the St. Marylebone Schools and the London County Asylum, Norwood, 316 and 2,763 respectively, so that the total population of the District is 29,599.

Comparative Table to End of Year.

	Census 1891.	Census 1901.	East.	West.	Estimated to end of 1904.			Estimated to end of 1905.			Estimated to end of 1906.			Estimated to end of 1907.			Estimated to end of 1908.			Estimated to end of 1909.			Estimated to end of 1910.			Estimated to end of 1911.			Estimated to end of 1912.			Estimated to end of 1913.		
						East.	West.		East.	West.		East.	West.		East.	West.		East.	West.		East.	West.		East.	West.		East.	West.	Whle. Dist.	East.	West.	Whle. Dist.	East.	West.
Southall- Norwood	5188	9953	4516	5337	16640	7590	9050	18360	8095	10265	19380	8290	11090	21920	8925	12995	22515	9200	13315	23715	9730	13935	24670	10395	14275	25290	10540	14750	26205	10990	15215	26520	11120	15400
St. Marylebone Schools ...	335	—	—	412	—	—	412	—	—	412	—	—	412	—	—	412	—	—	371	—	—	371	—	—	345	—	—	320	—	—	309	—	—	316
London County Asylum	2037	—	—	—	—	2835	—	—	2855	—	—	2825	—	—	2825	—	—	2584	—	—	2584	—	—	2819	—	—	2801	—	—	2829	—	—	2763	—
Total ..	7560	13,200			19,907			21,627			22,617			25,157			25,470			26,670			27,834			28,442			29,343			29,599		



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SECTION II.

VITAL STATISTICS.

BIRTHS AND BIRTH-RATE.

The total number of births registered during the year was 711—males, 352; females, 359. The total includes outside births, 13. The birth-rate is 26·5 per 1,000.

Distributed in Wards, the births and rates are as follows :			
30·0 per 1,000 East Ward (pop. 11,080).		23·4 per 1,000 West Ward (pop. 15,656).	
Males.	Females.	Males.	Females.
—	—	—	—
166	168	186	191
334		377	
711			

15 illegitimate births were registered from the East Ward and 15 from the West.

The Curator of the Cemetery has notified the burial of 21 stillborn children.

COMPARATIVE TABLE.

YEAR.	WHOLE DISTRICT.		EAST WARD.		WEST WARD.	
	Births.	Rate.	Births.	Rate.	Births.	Rate.
1904	578	36·7	289	41·1	289	53·1
1905	576	32·5	245	31·1	331	33·6
1906	621	33·6	269	33·3	352	32·7
1907	677	31·2	281	33·0	396	30·8
1908	660	29·4	295	32·7	365	37·2
1909	686	29·4	268	28·5	418	30·0
1910	664	27·6	299	23·3	365	38·9
1911	689	29·2	311	31·8	378	27·3
1912	660	25·5	291	26·8	369	24·5
1913	711	26·5	334	30·0	377	23·4

Year.	Births.	Rate.	Population.
1904	578	36·7	15737
1905	576	32·6	17712
1906	621	33·6	18777
1907	677	31·2	21352
1908	660	29·4	22371
1909	686	29·4	23291
1910	664	27·6	24000
1911	689	29·2	23522
1912	660	25·5	25860
1913	711	26·5	26736

DEATH AND DEATH-RATES.

Whole District.

Total, 296 (Males, 148 ; Females, 148) ; *Rate*, 11·0 per 1,000.

The total number of deaths registered of persons dying within the district at all ages and from all causes was 218 (males, 107 ; females, 111).

For statistical purposes it is necessary to add to this figure the deaths of persons from your district who died in the Hillingdon Infirmary, the various London Hospitals, and Middlesex County Asylums. These “outside” deaths were 78 in number (males, 41 ; females, 37).

The total number of deaths, therefore, belonging to the district is 296, and the death rate 11·0 per 1,000. The deaths in Hanwell Asylum were 232 (males, 99 ; females, 133).

For the purpose of comparison the following table is shown, giving the birth and death-rates and the rates of infantile mortality in England and Wales and in certain parts of the country during the year 1913, the figures being provisional :—

	Annual Rate per 1,000 living.			Deaths under one year to 1,000 births.
	Births.	Deaths.		
		Crude.	Standardised.*	
England and Wales	23·9	13·7	13·4	109
96 great towns, including London ...	25·1	14·3	14·7	116
145 smaller towns	23·9	12·8	13·0	112
England and Wales, less the 241 towns	22·2	13·1	12·1	96
London	24·8	14·2	14·2	104

* The standardised death-rates (formerly called corrected death-rates) are the rates which would have been recorded had the sex and age constitution of the populations of the several areas been identical with that of England and Wales as enumerated in 1901.

Deaths and Death-rates—East and West Wards.

In the East Ward the deaths registered in the district were 96 (males, 47 ; females, 49). The “outside” deaths numbered 42 (males, 24 ; females, 18). Total deaths belonging to this Ward, 138. The death-rate on the estimated population of 11,080 is 12·6 per 1,000. In the West Ward the deaths registered in the district were 122 (males, 60 ; females, 62). The “outside” deaths were 36 (males 17 ; females, 19). Total deaths belonging to this Ward are 158. The death-rate on the estimated population of 15,656 is 10·0 per 1,000.

The Ages and Causes of Death are shown in the subjoined Tables for the whole District, and separately for the East and West Wards.

CAUSES OF DEATH.	DEATHS IN OR BELONGING TO WHOLE DISTRICT AT SUBJOINED AGES.								DEATHS IN OR BELONGING TO LOCALITIES (AT ALL AGES).			TOTAL DEATHS IN PUBLIC INSTITUTIONS IN THE DISTRICT.			
	All Ages.	Under 1 year.	1 and under 2.	2 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	Over 65.	East.	West.	Outside Deaths.	St. Mary-lebone Schools.	Sana-torium.	Hanwell Asylum.
Enteric Fever...	17	6	4	2	4	—	1	—	—	8	9	—	—	—	—
Measles ..	2	1	1	—	1	—	—	—	—	1	1	—	—	—	—
Whooping Cough ..	7	—	2	4	1	—	—	—	—	5	2	—	—	4	—
Diphtheria ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery ..	22	—	—	—	—	—	1	11	8	5	—	4	—	—	5
Heart Disease .	22	—	—	1	1	5	12	2	—	9	13	5	—	—	13
Phthisis ..	9	1	1	2	4	1	—	—	—	5	3	1	—	—	27
Tuberculous Meningitis ..	25	—	—	—	2	1	6	10	8	6	8	11	—	—	3
Other Tuberculous Diseases ..	1	—	—	—	—	—	2	1	9	9	7	3	—	—	7
Cancer ..	19	5	1	1	—	—	—	3	1	7	12	3	—	—	18
Bronchitis ..	22	8	8	2	2	—	4	1	4	7	6	3	—	—	16
Broncho-pneumonia ..	16	2	2	1	—	—	—	—	—	4	—	—	—	—	14
Pneumonia ..	—	13	3	—	—	—	—	—	—	1	12	—	—	—	3
Other Respiratory Diseases..	16	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Diarrhoea and Enteritis ..	2	—	—	—	2	—	—	—	—	—	—	1	—	—	3
Appendicitis ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Alcoholism ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cirrhosis of Liver ..	2	—	—	—	—	—	—	1	1	2	2	2	—	—	8
Nephritis ..	6	—	—	—	—	—	4	1	—	—	—	—	—	—	—
Diseases of Parturition ..	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—
Premature Births ..	17	17	—	—	2	4	3	—	—	9	8	6	—	—	1
Accidents ..	14	1	—	—	—	—	2	1	3	3	5	—	—	—	—
Suicide ..	2	16	1	1	1	3	6	11	32	1	1	38	—	—	113
Other Defined Diseases ..	71	—	—	—	—	—	—	2	—	13	20	—	—	—	—
Ill-defined Diseases ..	2	—	—	—	—	1	—	—	—	—	2	—	—	—	—
Rheumatic Fever ..	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—
All Causes ..	296	70	23	15	18	15	44	44	67	96	122	78	—	4	232

Deaths, and Death Rates distributed into Wards.

CAUSES OF DEATH.	EAST WARD.							WEST WARD.								
	Under 1 year.	1 and under 2.	2 and under 3.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	Over 65.	Under 1 year.	1 and under 2.	2 and under 3.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	Over 65.
Measles ...	2	2	2	2	—	—	—	—	4	2	—	2	—	1	—	—
Whooping Cough	1	2	—	—	—	—	—	—	—	1	—	1	—	—	—	—
Diphtheria	—	—	3	—	—	—	—	—	—	—	—	—	—	—	1	—
Erysipelas	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
Cancer ...	—	—	—	—	—	2	3	1	—	—	—	1	—	2	—	—
Phthisis ...	—	—	—	—	1	7	—	—	1	—	—	1	—	4	—	—
Tubercular Meningitis ...	—	1	2	1	1	—	—	—	3	1	—	2	—	1	—	—
Other Tubercular Diseases	—	—	—	—	—	—	—	—	6	3	—	—	—	—	—	—
Bronchitis ...	2	—	1	—	—	1	4	—	1	3	1	—	—	—	—	—
Broncho-pneumonia	1	3	1	—	—	2	—	1	1	1	—	1	—	1	—	—
Pneumonia	1	1	1	—	—	—	—	—	10	2	—	—	—	—	—	—
Diarrhoea and Enteritis	3	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Alcoholism	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cirrhosis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Nephritis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diseases of Parturition...	—	—	—	—	—	2	—	—	8	—	—	—	—	1	—	—
Premature Births	9	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Suicide ...	1	—	—	—	—	1	—	—	—	—	—	2	—	—	—	—
Accident ...	—	—	—	—	1	1	—	—	—	—	—	1	—	—	—	—
Heart Disease	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—
Defined Diseases	4	—	—	—	1	2	2	3	8	—	—	—	—	—	6	—
Ill-defined Diseases	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	—
Appendicitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—
Rheumatic Fever	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
TOTALS ...	24	10	10	6	5	19	11	11	41	10	3	10	3	9	18	28

INFANT MORTALITY DURING 1913.

The total number of deaths under one year of age was 70. Rate per 1,000, 98·4. The rate in England and Wales was 109, and for the 145 smaller towns, 112 per 1,000.

Tables of Infant Deaths from Stated Causes in Weeks and Months
under 1 Year of Age. Whole District.

CAUSE OF DEATH.			Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 4 weeks.	1-3 months.	3-6 months.	6-9 months.	9-12 months.	Total Deaths under 1 year.
All Causes	Certified.		16	4	—	3	23	20	6	9	10	68
	Uncertified.		2	—	—	—	2	—	—	—	—	2
Small-pox			—	—	—	—	—	—	—	—	—	—
Chicken-pox			—	—	—	—	—	—	—	—	—	—
Measles			—	—	—	—	—	—	3	3	6	
Scarlet Fever			—	—	—	—	—	—	—	—	—	—
Whooping Cough... ..			—	—	—	—	—	—	—	1	1	
Diphtheria and Croup			—	—	—	—	—	—	—	—	—	—
Erysipelas			—	—	—	—	—	—	—	—	—	—
Tuberculous Meningitis			—	—	—	—	—	1	—	—	—	1
Abdominal Tuberculosis (<i>b</i>)			—	—	—	—	—	—	—	—	—	—
Other Tuberculous Diseases			—	—	—	—	—	—	—	—	—	—
Meningitis (<i>not Tuberculous</i>)... ..			—	—	—	—	—	—	—	—	—	—
Convulsions			1	1	—	—	2	—	—	—	—	2
Laryngitis			—	—	—	—	—	—	—	—	—	—
Bronchitis			—	—	—	—	—	2	—	2	1	5
Pneumonia (all forms)			—	—	—	—	—	5	—	—	5	10
Diarrhoea			—	—	—	—	—	4	2	1	—	7
Enteritis			—	—	—	—	—	2	2	2	—	6
Gastritis			—	—	—	—	—	—	—	—	—	—
Syphilis			—	—	—	—	—	—	—	—	—	—
Rickets			—	—	—	—	—	—	—	—	—	—
Suffocation, overlying			—	—	—	—	—	—	—	—	—	—
Injury at Birth			1	—	—	—	1	—	—	—	—	1
Atelectasis... ..			1	—	—	—	1	—	—	—	—	1
Congenital Malformations (<i>c</i>)			—	—	—	1	1	—	—	—	—	1
Premature Birth			10	2	—	2	14	2	1	—	—	17
Atrophy, Debility and Marasmus			—	—	—	—	—	3	—	1	—	4
Other Causes			5	1	—	—	6	2	—	—	1	8
Totals			18	4	—	3	25	20	6	9	10	70

Net Births in the year	{	legitimate	..	681
		illegitimate	...	30
Net Deaths in the year of	{	legitimate infants	...	64
		illegitimate infants	...	6

EAST WARD.—Infantile Mortality during the Year 1913.
74·8 per 1,000.

Net Deaths from stated causes at various ages under One
Year of Age.

CAUSE OF DEATH.			Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 1 month.	1-3 months.	3-6 months.	6-9 months.	9-12 months.	Total Deaths under 1 year.
All Causes	Certified ...	...	5	3	—	2	10	6	2	2	4	24
	Uncertified ...	...	1	—	—	—	1	—	—	—	—	1
Small-pox ...	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Chicken-pox ...	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Measles ...	...	...	—	—	—	—	—	—	—	1	1	2
	...	...	—	—	—	—	—	—	—	—	—	—
Scarlet Fever ...	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Whooping Cough ...	...	...	—	—	—	—	—	—	—	—	1	1
	...	...	—	—	—	—	—	—	—	—	—	—
Diphtheria and Croup ...	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Erysipelas ...	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Tuberculous Meningitis ...	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Abdominal Tuberculosis (b) ...	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Other Tuberculosis Diseases ...	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Meningitis (not Tuberculous) ...	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Convulsions ...	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Laryngitis ...	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Bronchitis ...	...	...	—	—	—	—	—	—	—	1	1	2
	...	...	—	—	—	—	—	—	—	—	—	—
Pneumonia (all forms) ...	...	...	—	—	—	—	—	1	—	—	1	2
	...	...	—	—	—	—	—	—	—	—	—	—
Diarrhoea ...	...	...	—	—	—	—	—	2	1	—	—	3
	...	...	—	—	—	—	—	—	—	—	—	—
Enteritis ...	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Gastritis ...	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Syphilis ...	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Rickets ...	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Suffocation, overlying ...	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Injury at birth ...	...	...	1	—	—	—	1	—	—	—	—	1
	...	...	—	—	—	—	—	—	—	—	—	—
Atelectasis... ..	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Congenital Malformations (c) ...	...	...	—	—	—	—	—	—	—	—	—	—
	...	...	—	—	—	—	—	—	—	—	—	—
Premature Birth ...	...	...	3	2	—	2	7	1	1	—	—	9
	...	...	—	—	—	—	—	—	—	—	—	—
Atrophy, Debility and Marasmus ...	...	...	—	—	—	—	—	1	—	—	—	1
	...	...	—	—	—	—	—	—	—	—	—	—
Other Causes ...	...	...	2	1	—	—	3	1	—	—	—	4
	...	...	—	—	—	—	—	—	—	—	—	—
Totals			6	3	—	2	11	6	2	2	4	25

Net Births in the year { legitimate ... 319
illegitimate ... 15

Net Deaths in the year of { legitimate infants ... 24
illegitimate infants ... 1

WEST WARD.—Infant Mortality during the Year 1913.
110·9 per 1,000.

Net Deaths from stated causes at various Ages under One
Year of Age.

CAUSE OF DEATH.			Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 1 month.	1-3 months.	3-6 months.	6-9 months.	9-12 months.	Total Deaths under 1 year.
All Causes	Certified ..	..	11	1	..	1	13	14	4	7	6	44
	Uncertified		1	—	—	—	1	—	—	—	—	1
{	Small-pox ...	..	...	...	...	...	...	...	...	...	...	...
	Chicken-pox ...	..	...	...	...	...	...	...	...	...	...	...
{	Measles ...	..	...	...	...	...	...	...	...	2	2	4
	Scarlet Fever ...	..	...	...	...	...	...	...	...	...	...	...
{	Whooping Cough...	..	...	...	...	...	...	...	...	...	...	...
	Diphtheria and Croup	...	...	...	...	...	...	...	...	...	...	...
{	Erysipelas ...	..	...	...	...	...	...	...	...	...	...	...
	Tuberculous Meningitis ...	..	...	...	...	...	...	...	1	...	...	1
{	Abdominal Tuberculosis(<i>b</i>)	...	...	...	...	...	...	...	...	...	...	...
	Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...	...
{	Meningitis	...	...	...	...	...	...	...	...	...	...	...
	(<i>not Tuberculous</i>)	...	...	...	...	...	...	...	...	...	...	...
{	Convulsions ...	..	1	1	...	...	2	...	...	...	...	2
	Laryngitis ...	..	...	...	...	...	...	...	...	...	...	...
{	Bronchitis ...	..	...	...	...	...	...	2	...	1	...	3
	Pneumonia (all forms)	...	...	...	...	...	...	4	...	...	4	8
{	Diarrhœa ...	..	...	...	...	...	...	2	1	1	...	4
	Enteritis ...	..	...	...	...	...	...	2	2	2	...	6
{	Gastritis ...	..	...	...	...	...	...	...	...	...	...	...
	Syphilis ...	..	...	...	...	...	...	...	...	...	...	...
{	Rickets ...	..	...	...	...	...	...	...	...	...	...	...
	Suffocation, overlying	...	...	...	...	...	...	...	...	...	...	...
{	Injury at Birth ...	..	...	...	...	...	...	...	...	...	...	...
	Atelectasis...	..	1	...	...	...	1	...	...	...	...	1
{	Congenital Malforma-	...	...	...	...	...	...	...	...	...	...	...
	tions (<i>c</i>) ...	..	...	...	...	...	1	1	...	...	...	1
{	Premature Birth ...	..	7	...	...	...	7	1	...	...	...	8
	Atrophy, Debility and	...	...	...	...	...	...	2	...	1	...	3
{	Marasmus ...	..	...	...	...	...	...	...	...	...	...	...
	Other Causes ...	..	3	...	...	...	3	1	...	...	...	4
Totals ...			12	1	...	1	14	14	4	7	6	45

Net Births in the Year { legitimate ... 362
illegitimate ... 15

Net Deaths in the year of { legitimate infants ... 40
illegitimate infants ... 5

COMPARATIVE TABLES.—INFANT MORTALITY.

WHOLE DISTRICT.

Year.	Deaths under 1 year.	Births.	Birth-rate per 1,000 living.	Infant Mortality Rate.
1904	85	578	36·7	147·0
1905	58	576	32·5	100·6
1906	96	621	33·6	154·0
1907	64	677	31·2	94·3
1908	63	660	29·4	95·4
1909	65	686	29·4	94·7
1910	63	664	27·6	94·8
1911	81	689	29·2	129·3
1912	73	660	25·5	110·6
1913	70	711	26·9	98·4

1913.				East Ward.		West Ward.		Whole District.
Population	...	...	...	11,080	...	15,656	...	26,736
Births	...	...	...	334	...	377	...	711
Birth-rate	...	...	...	30·0	...	23·4	...	26·5
Deaths under 1 year	...	...	...	25	...	45	...	70
Rate per 1,000 children born and registered	...	...	...	74·8	...	110·9	...	98·4
Total deaths at all ages	...	...	...	138	...	158	...	296
Total death-rate	...	...	...	12·6	...	10·0	...	11·0

1912.								
Population	...	...	...	10,820	...	15,040	...	25,860
Births	...	...	...	291	...	369	...	660
Birth-rate	...	...	...	26·8	...	24·5	...	25·5
Deaths under 1 year	...	...	...	32	...	41	...	73
Rate per 1,000 children born and registered	...	...	...	109·9	...	111·1	...	110·6
Total deaths at all ages	...	...	...	106	...	133	...	239
Total death-rate	...	...	...	9·7	...	8·8	...	9·2

1911.								
Population	...	...	...	9,760	...	13,762	...	23,522
Births	...	...	...	311	...	378	...	689
Birth-rate	...	...	...	31·8	...	27·3	...	29·2
Death under 1 year	...	...	...	32	...	49	...	81
Rate per 1,000 children born and registered	...	...	...	117·5	...	102·8	...	129·3
Total deaths at all ages	...	...	...	95	...	149	...	244
Total death-rate	...	...	...	9·7	...	10·8	...	10·3

1910.								
Population	...	...	...	9,790	...	14,210	...	24,000
Births	...	...	...	299	...	365	...	664
Birth-rate	...	...	...	23·3	...	38·9	...	27·6
Deaths under 1 year	...	...	...	27	...	36	...	63
Rate per 1,000 children born and registered	...	...	...	90·3	...	98·6	...	94·8
Total deaths at all ages	...	...	...	97	...	117	...	214
Total death-rate	...	...	...	9·9	...	8·2	...	8·6

1909.				East Ward.		West Ward.		Whole District.
Population	...	...	...	9,400	...	13,891	...	23,291
Births	...	...	...	268	...	418	...	686
Birth-rate	...	...	...	28.5	...	30.0	...	29.4
Deaths under 1 year	...	...	...	30	...	35	...	65
Rate per 1,000 children born and registered	...	...	...	111.9	...	83.7	...	94.7
Total deaths at all ages	...	...	...	111	...	114	...	225
Total death-rate	...	...	...	11.8	...	8.2	...	9.6
1908.								
Population	...	...	...	9,000	..	13,371	...	22,371
Births	...	...	...	295	...	365	...	660
Birth-rate	...	...	...	32.7	...	27.2	...	29.4
Deaths under 1 year	...	...	...	33	...	30	...	63
Rate per 1,000 children born and registered	...	...	...	118.8	...	82.1	...	95.4
Total deaths at all ages	...	...	...	114	...	107	...	221
Total death-rate	...	...	...	12.6	...	8.2	...	9.8

ZYMOTIC DEATH-RATES.

DEATHS FROM NOTIFIABLE DISEASES.—WHOLE DISTRICT.

Total.				East Ward				West Ward.
7	...	...	...	5	...	...	...	2

The death-rate *from the Scheduled Notifiable Diseases*, viz.: Small-pox, Scarlatina, Diphtheria, Membranous Croup, Typhus, Typhoid, Puerperal Fever, and Erysipelas is 0.2 per 1,000 persons living, as compared with 0.1 for 1912.

In the East Ward the rate is 0.4, and in the West Ward 0.1, as compared with 0.09 and 0.1 per 1,000 for 1912.

COMPARATIVE TABLE.—WHOLE DISTRICT.

1904	...	...	...	...	0.3 per 1,000	} Average Rate, 0.5 per 1,000.
1905	...	...	...	...	0.2 „ „	
1906	...	...	...	...	0.3 „ „	
1907	...	...	...	...	0.2 „ „	
1908	...	...	...	...	0.08 „ „	
1909	...	...	...	...	0.1 „ „	
1910	...	...	...	...	0.08 „ „	
1911	...	...	...	...	0.01 „ „	
1912	...	...	...	...	0.1 „ „	
1913	...	...	...	...	0.2 „ „	

DEATHS FROM ZYMOTIC DISEASES, NOT NOTIFIABLE.

Total.				East Ward.				West Ward.
35	...	...	...	13	...	...	...	22

The death-rate for the whole district from *Zymotic Disease not Notifiable*, viz., Measles, Whooping Cough, and Diarrhœa, is 1.3 per 1,000 persons living.

In the East Ward 1.1, and in the West Ward 1.4 per 1,000, as compared with 0.6 and 0.5 respectively for 1912.

COMPARATIVE TABLE.—WHOLE DISTRICT.

1904	...	...	...	...	2.5 per 1,000	Average Rate, 1.3 per 1,000.
1905	...	...	...	...	1.4 „ „	
1906	...	...	...	...	2.2 „ „	
1907	...	...	...	...	1.1 „ „	
1908	...	...	...	...	1.1 „ „	
1909	...	...	...	...	0.8 „ „	
1910	...	...	...	...	0.7 „ „	
1911	...	...	...	...	1.7 „ „	
1912	...	...	...	...	0.6 „ „	
1913	...	...	...	...	1.3 „ „	

DEATHS FROM ALL ZYMOTIC DISEASES, NOTIFIABLE
AND NON-NOTIFIABLE.

Total.	East Ward.	West Ward.
42	18	24

Rate from all zymotic diseases for the whole district is 1.5 per 1,000—East Ward 1.6, West Ward 1.5—as compared with (for 1912) whole district 0.7 per 1,000.

WHOOPIING COUGH.

At the beginning of the year there was a considerable number of cases of Whooping Cough, but the disease did not assume epidemic proportions, and caused only two deaths.

CEREBRO-SPINAL MENINGITIS.

No case of this disease, or of Acute Poliomyelitis, occurred during the year.

ENTERIC FEVER.

The district has always enjoyed remarkable immunity from Enteric Fever, and for the present year no case was recorded.

PULMONARY TUBERCULOSIS AND OTHER TUBERCULOUS
DISEASES.

The notifications relating to Tuberculosis are shown in the following table :—

	Whole District.	East Ward.	West Ward.	London County Asylum.	Rate per 1,000 Popl.
Pulmonary Tuberculosis	55	22	33	—	2.05
Other Tubercular Diseases	32	17	15	—	1.1
Totals	87	39	48	—	

PULMONARY TUBERCULOSIS AND OTHER TUBERCULOUS DISEASES (continued).

Table (continued):—

	Pulmonary Tuberculosis.				Other Tuberculosis.	
	1912.		1913.		1913 (since 1st Feb.).	
	No. of Cases Notified.	*Rate per 1,000 of population.	No. of Cases Notified.	*Rate per 1,000 of population.	No. of Cases Notified.	*Annual rate per 1,000 of population.
London	33,392	7.39	22,655	5.01	6,428	1.55
England (excluding London)	72,193	2.44	68,446	2.32	30,050	1.11
Wales and Monmouth	4,966	2.01	5,432	2.19	1,712	0.75
Total ...	110,551	3.03	96,553	2.64	38,190	1.14

* The rates have been calculated upon the estimated population for the middle of 1912.

Twenty-six of the cases were attending different London Hospitals when notified ; 10 of the 87 notified cases were school children. A number of the patients that lived in this district less than a year may have come to reside here for the benefit of their health.

Seventeen rooms were disinfected after removal or death of the patient.

COMPARATIVE TABLE.—WHOLE DISTRICT.

1904	...	...	...	...	2.6 per 1,000	Average Rate, 1.4 1,000.
1905	...	...	...	...	1.5 „ „	
1906	...	...	...	...	2.5 „ „	
1907	...	...	...	...	1.4 „ „	
1908	...	...	...	...	1.2 „ „	
1909	...	...	...	...	0.9 „ „	
1910	...	...	...	...	0.7 „ „	
1911	...	...	...	...	1.9 „ „	
1912	...	...	...	...	0.7 „ „	
1913	...	...	...	...	1.5 „ „	

DEATHS FROM PHTHISIS AND OTHER TUBERCULAR DISEASES.

COMPARATIVE TABLE.—WHOLE DISTRICT.

	Phthisis.			Rate.		Other Tubercular Diseases.			Rate.	
1904	...	12	...	0·7	...	...	4	...	0·2	
1905	...	12	...	0·6	...	...	10	...	0·5	
1906	...	13	...	0·6	...	...	7	...	0·0	
1907	...	15	...	0·7	...	...	6	...	0·2	
1908	...	19	...	0·8	...	...	10	...	0·4	
1909	...	12	...	0·5	...	...	15	...	0·6	
1910	...	18	...	0·8	...	...	12	...	0·5	
1911	...	16	...	0·6	...	...	3	...	0·01	
1912	...	20	...	0·7	...	...	5	...	0·2	
1913	..	22	..	0·8	...	...	10	...	0·3	

22 deaths from Pulmonary Tuberculosis were registered—6 belonging to the East and 16 to the West Ward. The rate for the whole district is 0·8 per 1,000 ; for the East Ward 0·5, and 1·0 for the West Ward.

There were also 10 deaths from other forms of Tuberculosis—6 in the East Ward and 4 in the West. The rate for the whole district is 0·3 per 1,000, for the East Ward 0·5, and 0·2 for the West Ward.

RESPIRATORY DEATH-RATE.

Under this heading are included all deaths due to diseases of the respiratory organs other than Pulmonary Tuberculosis.

	Whole District.			East Ward.			West Ward.		
	57	...	...	28	...	...	29		
Rate per 1,000	2·1	...	...	2·5	...	...	1·8		

COMPARATIVE TABLE.—WHOLE DISTRICT.

1904	...	...	...	...	3 0 per 1,000		
1905	...	...	...	...	1·3	„	„
1906	...	...	...	...	2·0	„	„
1907	...	...	...	...	2·8	„	„
1908	...	...	...	...	2·5	„	„
1909	(48 deaths)			...	2·6	„	„
1910	(42 „)			...	1·7	„	„
1911	(37 „)			...	1·5	„	„
1912	(51 „)			...	1·9	„	„
1913	(57 „)			...	2·1	„	„

The total death-rate, infant mortality, and zymotic death-rate are those most useful for evidence of the health conditions of a small town, and their relative value for this purpose is in the order here given.

For the year 296 deaths were registered belonging to the district, as compared with 239 for 1912. The gross death-rate for the whole district is 11·0 : this is 1·8 per 1,000 more than for last year, and is the highest recorded for the past 4 years. The causes of death showing the greatest increase were as follows : Measles, 15 ; Diphtheria, 5 ; Heart Disease, 8 ; Tubercular Diseases, 7 ; Cancer, 9 ; Pneumonia and Broncho-pneumonia, 12 ; Diarrhœa, 9. Outside deaths were 22 in excess of last year. The greatest decrease in recorded deaths was from : Whooping Cough, 5 ; Bronchitis, 5 ; Nephritis, 5 ; Premature Births, 8.

It is to be remembered that in recent years the death-rate has been an exceptionally low one—lower, I believe, than for most districts with a similar population—and the rate for 1913 may be regarded as about the normal

STANDARD DEATH-RATE.

In order to compare the death-rate of the district with that of the country generally, the age and sex of the district population has to be approximated to that of England and Wales. By means of a factor calculated from the census data the gross death-rate of the district can be corrected to what it would be if the age and sex distribution of the district population were the same as that for England and Wales. This factor is furnished by the Registrar-General as 1·0370. Thus 11·0 multiplied by 1·0370 gives 11·4, which is the corrected death-rate per 1,000. The standard rate for England and Wales was 13·4, and for the 145 small towns 13·0 per 1,000.

COMPARATIVE MORTALITY RATE.

If the corrected district rate is compared with the rate at all ages for England and Wales, and taken at 1,000, it gives what is known as the comparative mortality figure. Thus :—

$$\frac{\text{Corrected District Rate } 11\cdot4}{\text{Rate for England and Wales } 13\cdot4} = \frac{11\cdot4}{13\cdot4} \times 1,000 = 850\cdot7,$$

the figure of comparative mortality for Southall-Norwood. This may be expressed by saying that the same number of persons which gave 1,000 deaths in England and Wales gave 850·7 deaths in Southall-Norwood.

INFANT MORTALITY.

By infant mortality is meant the number of children out of 1,000 registered births dying before they complete their first year of life. This rate is regarded as a good index of general circumstances, since the estimate is based on the actual number of births and deaths, and is not susceptible to statistical error from estimating the population.

As will be seen from the statistical tables, the number of infant deaths fluctuates widely from year to year, this variation being brought about in great measure by climatic conditions. Generally speaking, a hot, dry summer is associated with a high infant mortality, and a cool, wet summer with a low one. Infant mortality, moreover, generally rises and falls in proportion to the birth-rate. On referring to the comparative tables it will be seen that since 1907 there has been a marked decrease in the average rate, which is no doubt partly explained by the cool, wet summers of these years, and also in part by concurrent decline in the number of births, which has fallen from an average of about 34 to 27 per 1,000. For 1913 a decrease is shown in the following causes of infant death: Whooping Cough, 4; Convulsions, 7; Premature Births, 5. An increase is shown in: Measles, 6; Diarrhœa, 7.

I find from the registered causes that the highest mortality occurred—as in previous years—in those areas, and more particularly in certain streets of the areas, where the lower classes of working people live. Unquestionably many of these infant deaths are essentially preventable, some being due to constitutional diseases, and others to unsatisfactory domestic circumstances, parental ignorance, and improper artificial feeding.

The teaching of hygiene in the public elementary schools will do much to diminish the rate of infantile mortality by instructing the future mothers on the care and feeding of infants and domestic hygiene generally. The present need is to get in touch with the mothers of to-day and instruct them as to the proper method of infant feeding and management. To this end the Council distribute leaflets dealing with the subject to all registering the births of children. In many districts qualified women health visitors have been appointed, who visit all houses systematically where there is a young baby until the baby is a year old. She sees whether or not the baby is fed and clothed properly, and at the same time observes the condition of the house—as to its cleanliness, ventilation, and general sanitary state. All conditions bearing upon the causation of diarrhœal diseases are enquired into and reported upon; for instance, the kind of food given, how it is stored and prepared for use, the kind of bottle used, how it is cleansed, and so on. Practical instruction in these matters is given. There can be no doubt that domestic cleanliness and proper food carefully prepared are the greatest factors in the prevention of diarrhœal diseases. I certainly think that the appointment of a woman health visitor for the district is highly desirable. I am sure the work of such an officer would result in a permanent diminution in the rate of infantile mortality; and the effect of this on the total death-rate would be such as to make it lower than those of most districts of similar character and population.

ZYMOTIC DEATH-RATE.

The zymotic death-rate is popularly regarded as the criterion of healthiness of a district ; but this is only true to a very limited extent, since the group includes Measles and Whooping Cough, whose prevalence is largely independent of sanitary conditions, and which are not preventable to any extent under existing legislation. On the other hand, some of the diseases included in this category are notifiable, and to some extent the rate from this sub-group is a measure of the efficiency of the preventive measures taken to control their spread. For these reasons the rates of mortality from zymotic diseases are tabulated in these sub-groups and as a whole (see tables on pages 18 and 19).

For several years past the vital statistics for the East Ward have compared unfavourably with those for the West Ward. In commenting on this circumstance in previous reports I have intimated that the contrary would be expected, since in the West Ward almost all the houses are occupied by working people, whereas in the East Ward there is a large number of better-class houses. Taking infant mortality as the comparative index of sanitary circumstances, and distributing the deaths to the different streets in which they occurred, it was found that excess of infant deaths in the East Ward centred around certain streets in its south-east portion, whereas in the West Ward the deaths were more evenly distributed, although here a higher mortality was shown in those areas most densely populated. Similar facts relating to infant mortality are again evidenced for the present year. Thus, out of the total 25 infant deaths in the East Ward, 11 occurred in Hammond Road area, whilst in the West Ward 14 of the 45 deaths occurred in Clarence Street and its immediate neighbourhood.

The following table shows the various rates of mortality and morbidity for the two Wards during the year :—

	East.	West.
Birth-rate	30·0	23 4
Death-rate	12·6	10·0
Infant Mortality	74·8	110·9
Notifiable Zymotic Rate	0·4	0·1
Non-notifiable Zymotic Rate	1·2	1·4
Phthisis Rate	0·5	1·0
Respiratory Rate	2·5	1·8

In comparing these figures it is to be remembered that the West Ward has the benefit of the population of the St. Marylebone Schools, which, if excluded, would raise the rates shown somewhat.

SECTION III.

NOTIFIABLE DISEASES.

The number of cases of infectious disease reported under the Infectious Diseases Notification Act during the year was 253 ; the certificates are classified in the following table :—

Diseases.	Total for District.	East Ward.	West Ward.	London County Asylum.	St. Mary- lebone Schools.	Rate per 1,000 of Popula- tion.
Scarlet Fever ..	112	24	69	3	16	4·1
Diphtheria and Membranous Croup }	45	23	21	—	1	1·6
Enteric Fever ...	—	—	—	—	—	—
Puerperal Fever ...	1	1	—	—	—	—
Erysipelas ...	8	3	4	1	—	—
Small-pox ...	—	—	—	—	—	—
Phthisis ...	55	22	33	—	—	2·05
Other Tuberculous Diseases ...	32	17	15	—	—	1·1
Poliomyelitis...	—	—	—	—	—	—
Cerebro-spinal Fever	—	—	—	—	—	—
Totals ...	253	90	142	4	17	—

During 1913 the total number of cases of the chief notifiable diseases in England and Wales was as follows :—

Disease.	No. of cases notified.	Rate per 1,000 of population.
Pulmonary Tuberculosis ...	96,533	2·64
Tuberculosis (other forms since 1st February, 1913) ...	38,190	1·14
Small-pox ...	90	0·00
Typhus Fever...	18	0·00
Scarlet Fever ...	130,626	3·57
Diphtheria ...	50,850	1·39
Enteric Fever...	8,117	0·22
Continued Fever ...	108	0·00
Relapsing Fever ...	—	—
Puerperal Fever ...	1,989	0·05
Erysipelas ..	23,114	0·63
Cerebro-spinal Fever ...	304	0·01
Poliomyelitis ...	728	0·02
Cholera ...	—	—
Plague ...	—	—

The following Table shows the number of Infectious Diseases notified, the Infectious Sickness Rate, and the mean for the previous ten years.

YEARS.	Popula- tion.	Scarlet Fever.	Small- pox.	Diphtheria and Mem- branous Group.	Typhoid Fever.	Ery- sipelas.	Puerperal Fever.	Phthisis.	Other Tuberculous Diseases.	Acute Polio- myelitis.	Cerebro- spinal Fever.	Totals.	Infectious Sickness. Rate per 1,000 Population.
1904	13832	80	...	18	9	20	2	...	..	...	..	129	9.3
1905	15737	145	..	19	4	15	...	...	..	...	..	183	11.8
1906	17712	69	...	29	3	15	...	...	...	...	...	116	6.5
1906	18777	99	...	31	9	25	1	...	...	...	...	165	8.7
1907	21352	38	...	24	2	20	...	...	...	...	...	84	3.9
1908	22371	54	...	19	1	18	1	...	...	...	...	93	4.1
1909	23291	34	...	38	6	9	...	...	...	...	...	87	3.7
1910	24000	31	...	4	1	6	1	...	..	...	...	43	1.8
1911	23522	56	...	25	2	5	..	...	...	...	...	88	3.7
1912	25860	58	...	43	3	11	1	58	4	4	...	184	7.1
Mean	...	66.4	—	24.8	4.0	14.4	0.6	...	...	...	...	117.2	6.0
1913	26736	112	...	45	...	8	1	55	32	...	...	253	9.4

The Distribution of the above Cases into East and West Wards is shown in the following Table.

Wards	Estimated Population.	Small-pox.	Scarlet Fever.	Diphtheria and Membranous Croup.	Erysipelas.	Typhoid.	Puerperal Fever.	Phthisis.	Other Tuberculous Diseases.	Acute Poliomyelitis.	Cerebro-spinal Fever.	Totals.
EAST.....	11,080	—	27	23	4	—	1	—	—	—	—	—
WEST ..	15,656	—	85	22	4	—	—	—	—	—	—	—

Compared with Table for 1912.

EAST.....	10,820	—	11	9	5	2	—	19	—	3	—	49
WEST	15,040	—	47	34	6	1	1	41	4	1	—	135

The Distribution of the Cases, North and South of the Railway, &c., is as follows:

	North.	South.	Hayes Bridge Newell's Fields.	Norwood.	London County Asylum.	Schools.	White Street.	North Hyde.
Scarlet Fever ...	37	44	11	—	3	16	—	1
Diphtheria ...	24	18	1	—	—	1	1	—
Membranous Croup }								
Enteric ...	—	—	—	—	—	—	—	—
Erysipelas ...	1	5	1	—	1	—	—	—
Puerperal Fever ...	—	1	—	—	—	—	—	—
Phthisis ..	20	31	—	1	—	—	1	2
Other Tuberculous Diseases	14	16	—	1	—	—	1	—
Acute Poliomyelitis ...	—	—	—	—	—	—	—	—
Cerebro-spinal Fever ..	—	—	—	—	—	—	—	—

SCARLET FEVER.

The number of cases notified was 112, as compared with 58 for 1912 : of these 59 were males and 53 females ; with the exception of 9 all were removed to the Isolation Hospital. The cases occurred at the following ages :—

Ages.				
Under 1 year	1—5	5—15	15—25	25—65
—	22	84	4	2

Cases were notified every month as follows :—

Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
7	14	4	2	1	2	17	7	5	20	9	24

The notified cases for the months of 1912 were :—

Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
2	4	11	3	6	4	1	8	1	10	3	5

INCIDENCE OF SCARLET FEVER PER 1,000 OF POPULATION. WHOLE DISTRICT.

Year.	Rate per 1,000.
1904	9·2
1905	3·2
1906	4·8
1907	1·7
1908	2·4
1909	1·4
1910	1·2
1911	2·3
1912	2·1
1913	4·1
Average Rate ... 3·2	

The following tables show the distribution of the cases :—

SOUTH SIDE OF DISTRICT. STEAMFIELD ESTATE.

	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
Dudley Road	10	6	3	1	—	2	—	1	—	5
Gladstone Road	1	—	—	—	1	1	—	—	—	—
Queen's Road.....	6	7	6	6	8	3	2	—	2	7
Clarence Street.....	17	7	3	—	2	1	—	1	2	3
Spencer Street.....	4	—	2	—	2	—	—	—	—	1
Hartington Road.....	10	7	2	—	1	—	1	1	2	—
Sussex Road.....	—	1	2	2	1	—	2	—	—	2
Totals	48	28	18	9	15	7	5	3	6	18

STREETS BETWEEN FEATHERSTONE ROAD AND WESTERN ROAD, INCLUSIVE.

(And the part of North Hyde West of the Common.)

	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
North Hyde	1	2	1	3	—	—	—	—	—	1
Featherstone Road ...	4	—	2	1	2	1	—	—	1	1
Featherstone Terrace..	9	1	—	1	—	—	—	—	1	1
St. John's Road.....	5	—	—	—	—	—	—	—	1	—
Waltham Road	2	—	1	—	1	—	—	2	1	2
Elmfield Road	3	3	2	1	—	—	—	—	—	—
Western Road	6	1	1	—	—	—	1	2	2	2
Totals	30	7	7	6	3	1	1	4	6	7

STREETS BETWEEN WESTERN ROAD AND ADELAIDE ESTATE.

(Including West Side of King Street and North Hyde Common.)

	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
Recreation Road ...	—	—	—	—	—	—	—	1	—	1
N. Hyde Common ...	5	—	—	—	—	—	—	—	—	—
King Street	2	—	—	—	2	—	—	—	—	—
Dagmar Road	1	—	—	—	—	—	—	—	—	—
Pluckington Place ...	1	—	—	—	—	—	—	—	—	—
Florence Road	—	3	—	1	1	—	1	1	2	3
Albert Road	—	—	6	—	—	—	1	—	—	—
Leonard Road	—	—	—	—	—	—	—	1	1	—
Tachbrook Road	—	—	—	—	—	—	—	—	1	—
Totals	9	3	6	1	3	—	2	3	4	4

ADELAIDE ESTATE and Adjoining Streets.

	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
Regina Road.....	11	3	7	—	10	—	1	6	1	2
Adelaide Road	8	4	1	—	—	1	2	—	1	—
Clifton Road	2	—	1	—	—	—	—	—	—	1
Gordon Road.....	1	—	2	—	5	—	—	—	—	—
Inverness Road.....	—	1	1	1	1	3	—	—	—	1
Talbot Road	—	—	1	—	—	—	1	—	—	2
Lea Road	—	1	2	1	—	—	—	—	—	1
Beverley Road	1	—	—	—	—	1	—	2	—	2
Endsleigh Road.....	—	—	—	—	—	—	—	1	2	2
Totals	23	9	15	2	16	5	4	9	4	11

STREETS EAST OF KING STREET.

(Including Norwood Road and Norwood Green.)

	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
South Road ...	...	...	...	...	...	...	1	1	...	...
Woodland Place ...	.	1	...	...	...	...	...	...	...	...
Kingston Road ...	4	...	4	...	1	2	...	...	...	...
Osterley Park and adjoining Roads }	...	...	...	1	1	1	...	2	1	...
Havelock Road ..	1	4	1	...	...	...	...	...	...	...
East Side King St. ...	...	...	...	...	...	...	1	...	...	1
Hammond Road ...	4	1	3	2	1	1	5	3	2	4
Norwood Road ...	...	1	3	...	...	1	...	...	...	3
Hammond Road, E. ...	...	...	1	...	...	...	...	1	...	...
Rectory Road ...	...	...	...	...	1	...	...	...	...	...
Norwood Green ...	...	4	1	1	2	...	...	1	...	...
Top Locks ..	...	...	...	..	...	...	...	...	...	1
Gate House Asylum..	...	...	...	...	...	...	..	...	...	3
Totals ...	9	11	13	4	6	5	7	8	3	12

South Side.	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
Totals ...	119	58	56	22	43	18	19	27	23	52

NORTH SIDE OF THE DISTRICT.

(Divided by the Railway.)

	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
Hayes Bridge ...	...	...	...	...	...	...	...	...	7	11
White Street ...	4	3	2	1	...	...	...	...	...	...

STREETS ON THE HAMBRO' ESTATE AND VICINITY.

	1 04	1905	1906	1907	1908	1909	1910	1911	1912	1913
Beaconsfield Road ...	9	1	...	...	1	...	...	2	3	5
Oswald Road... ..	1	...	...	...	...	...	.	3	6	3
Abbott's Road ...	2	1	2	...	3	2	1	1	1	2
Hambro' Road ...	1	1	1	..	...	2	...	5	...	...
Grange Road... ..	...	...	...	2	...	..	1	...	...	1
Randolph Road ...	1	...	1	...	1	1	...	.	1	...
The Crescent ...	2	...	2	1	...	...	...	1	...	...
Totals ..	16	3	6	3	5	5	2	12	11	11

OTHER STREETS AND ROADS ON THE NORTH SIDE.

	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
South Road ...	...	...	8	1	...	...	...	6	1	16
Avenue Road	...	...	3	...	...	1	..	..	...	...
Cambridge Road	...	...	1	1	...	...	...	...	...	...
Hamilton Road	...	...	...	...	...	...	...	...	...	...
High Street ...	1	...	1	1	...	...	...	2	...	...
Lady Margaret Road	1	1	...	1	2	...	1	...	...	...
North Road ...	...	1	1	...	...	1	1	...	...	1
Shrubbery Road	...	...	2	...	...	...	...	...	...	1
Victoria Terrace	...	...	...	...	...	...	...	...	...	...
Grove Cottages	...	...	...	...	...	...	...	...	...	...
Grove Terrace	...	...	...	...	...	...	...	...	...	...
Durdan's Cottages	...	...	...	...	...	...	...	...	...	...
Mount Pleasant	...	...	3	...	1	2	..	...	1	...
Waxlow Farm	...	...	...	...	...	...	..	...	...	...
Mill Farm ...	...	...	...	...	...	...	...	...	...	...
Beachcroft Avenue	1	...	1	...	...	...	...	...	2	...
Northcote Avenue	...	...	1	..	..	1	3	3	3	3
West End Road	...	...	1	1	2	1	1	1	2	5
Saxon Road ..	...	...	1	1	...	...	..	..	2	...
Tudor Road ...	...	...	...	1	1	1	1	2	...	...
Newell's Fields	..	...	3	...	...	...	...	...	...	...
King's Parade	1	...	...	...	..	...	...	...	...	...
Trinity Road	...	1	1	1	...	...	1	...	...	1
Beresford Road	...	...	...	2	...	...	1	...	4	1
Townsend Road	...	...	...	...	...	4	1	...	1	8
Alexandra Avenue	...	...	...	...	...	...	...	...	...	1
Woodlands Road	...	...	...	...	..	...	...	...	1	1
Totals ...	4	3	27	10	6	11	10	14	17	38

North Side.	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
Totals ...	26	8	36	14	11	16	12	29	35	60

TOTAL CASES, SCARLET FEVER, WHOLE DISTRICT.

	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
South... ..	119	58	56	22	43	18	19	27	23	52
North	26	8	36	14	11	16	12	29	35	60
Totals	145	66	92	36	54	34	31	56	58	112

SCARLET FEVER.

The amount of Scarlet Fever is the highest for the past seven years, being 4·1 per 1,000 of population ; 52 cases occurred on the south and 60 on the north side ; or distributed into wards there were 27 in the East and 85 in the West. These numbers include cases occurring in institutions in the district ; 3 in Hanwell Asylum (nurses) and 16 scholars in the St. Marylebone Schools. Cases were notified every month, but the greatest incidence was in February, July, October, and December. At the beginning of the year there was an extensive outbreak of Measles in the district, and several of the cases notified at this time as Scarlet Fever ultimately proved to be Measles. For example, in February 2 patients were admitted into Hospital with supposed Scarlet Fever which turned out to be Measles, and there is no doubt that this confusion with Measles was probably a means of spreading the disease in the district, because many parents do not call in a doctor for Measles, and I have no doubt that many cases thought to be Measles were really Scarlet Fever. In July 8 children from 1 house at Hayes Bridge were admitted to Hospital within a day or two of each other. We had reason to believe the first of these children notified had contracted the illness whilst playing in Southall Park.

Of the group of 20 cases occurring in October, 19 were in connection with children attending Tudor Road Schools. Two of the patients were discovered in school by the School Medical Officer, and there can be little doubt they had been the means of spreading infection both in school and outside. I visited the schools in connection with these cases several times, and examined all the scholars there. The School Medical Officer was in daily attendance for some time making examinations, and certain children to whom suspicion attached were excluded from school ; but in no case was there any definite evidence of recent Scarlet Fever. The Council considered taking proceedings, under the Infectious Diseases Notification Act, against the parents of the two children already referred to ; but on reporting the matter I did not advise this being done, as I was satisfied the parents were ignorant of the nature of the children's illness.

The type of Scarlet Fever prevalent at this time was so mild that even medical men had often difficulty in recognising it during the acute stage ; many patients showed no desquamation or other sequelæ indicating recent Scarlet Fever ; none the less, it is highly probable that such cases are infectious even up to a late stage through harbouring germs in the throat and the nose. I have no doubt that it was by means of "carrier" cases of this kind that the complaint continued prevalent, for in November there was a fresh group of cases of a similar mild type in connection with Tudor Road

Schools. Although close observation had been kept in the interval for suspicious cases, none had come under notice.

The School Medical Officer and myself again examined every scholar in the infant department of these schools. It was thought desirable to exclude 5 children, because of the suspicious appearance of the throat and the nose ; but in no case was there decided evidence of present or recent Scarlet Fever.

No suspicion attached to the milk supply as the means of infection in any of the cases notified.

DIPHTHERIA AND MEMBRANOUS CROUP.

Forty-five cases of Diphtheria and Membranous Croup were notified, as compared with 43 for 1912 ; 16 were males, 29 females.

TABLE OF AGES.

Under 1 Year.	1-5 Years.	5-15 Years.	15-40 Years.	40-45 Years.
—	15	26	4	—

The distribution was as follows :—

	1913.		1912.		1911.		1910.		1909.		1908.		1907.		1906.		1905.		1904.	
	Cases.	Houses.	Cases.	Houses.	Cases.	Houses.	Cases.	Houses.	Cases.	Houses.	Cases.	Houses.	Cases.	Houses.	Cases.	Houses.	Cases.	Houses.	Cases.	Houses.
North of Railway	25	20	33	7	6	5	1	1	28	19	6	5	9	8	9	9	12	6	6	6
South of Railway	20	16	10	9	19	18	3	3	10	6	13	3	15	14	17	16	15	14	13	12

Cases were notified in the following months :—

Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
1	3	3	6	3	1	1	—	6	2	14	5

INCIDENCE OF DIPHTHERIA PER 1,000 POPULATION.

5.0

Average incidence per 1,000 for years 1904–1913.

1904 ...	1905 ...	1906 ...	1907 ...	1908 ...	1909 ...	1910 ...	1911 ...	1912 ...	1913
1.2	1.5	1.3	1.1	0.8	1.6	0.1	1.06	1.6	1.6

1.1

The incidence of Diphtheria for the year is 1.6 per 1,000, as compared with 1.6 for last year.

SICKNESS RATES PER 1,000 OF POPULATION.

—	England and Wales.	England.	Wales (including Mon-mouth).	London.	Aggregate of Administrative Counties of		Aggregate of County Boroughs of	
					England (excluding London).	Wales (including Mon-mouth).	England.	Wales (including Mon-mouth).
1911	1.32	1.33	1.30	1.64	1.22	1.21	1.47	1.68
1912	1.24	1.24	1.27	1.57	1.10	1.13	1.32	1.84

These diseases assumed undue prevalence during the last quarter of the year, and in February of this year (1914) the Local Government Board asked for a report on Notified Diphtheria for 16 weeks prior to February 14th. The report is here given, omitting preliminary considerations on population, schools, and sanitary circumstances generally.

During this period a total of 56 cases have been notified. As will be seen later on, a considerable number of these notifications related to children who were in all respects well, but who had Diphtheria germs in the throat or the nose, so-called "carrier cases," the majority having been discovered in the course of enquiries in the Public Elementary Schools.

I will deal with the groups of cases in chronological order. The first group comprises notifications received from October 27th to November 8th, 7 cases: 2 occurred on the south and 5 on the north side of the district. Brief particulars of the cases in this group are as follows: First case on the north side, October 27th, was the child of a doctor, a scholar at a private school (School "A"). I visited this school; there were no children present with sore-throats, nor any absentees, so far as was known because of sore-throat, except one scholar, notified of Diphtheria on September 26th. That patient had not returned to school.

The second case notified, October 31st, was on the south side of the district. This patient was in Fulham Hospital a year ago with Diphtheria. She attended Western Road School. There were no other cases in connection with this school, and nothing to indicate that infection had been acquired there.

The third case from the north side, notified November 1st, was a scholar at Tudor Road Infant School. She had been ill a week before being seen by a doctor.

The fourth case, notified November 2nd, a child living on the south side of the district, was not a school-goer, and was treated at home. The fifth case, notified November 6th, was a child attending

Tudor Road Infant School. This case was of some days' duration when notified. It was a very serious one, and we fully anticipated the fatal event. On November 8th there were two other cases notified from the same house as this fatal case. On the same date, November 8th, two further cases were notified in one house on the north side of the district. One of these patients had been attended for a week by a medical man. When the second child was taken ill swabs were taken from both which proved positive. Both were admitted to Hospital. The elder of these children attended Tudor Road Infant School. I had already visited Tudor Road Infant School on the occurrence of the first case there; on notification of these further cases I decided to examine the throats of all the children in this school. This was accordingly done in conjunction with one of the School Medical Officers. We found no case of obvious Diphtheria, or even sore-throat, but there were many children with running noses and slight soreness of the nostrils. We took, all together, about 30 swabs from throats and noses. All the nose cases were negative, but 2 from the throats were positive, although there was no soreness of the throat and both children were quite well. The usual steps were taken with regard to exclusion, etc., and no further cases occurred in this school for 2 months, when there was a further case, referred to later on.

GROUP 2.—This comprises 3 notified cases of Clinical Diphtheria, and 2 carrier cases found in the course of enquiries. All these cases occurred on the north side of the district, 2 in houses adjoining an unsuspected centre of infection.

The first notification related to a child with Membranous Croup, which was treated at home. It was a mild case, and got well in a few days; its diphtheritic nature was not established, but it was highly probable from what follows. A few days later a little boy in an adjoining house was notified with severe Diphtheria. It was a hæmorrhagic case; the patient died quite suddenly four days after removal to Hospital. This child was not a school-goer. On making enquiries into possible sources of infection it transpired that 2 children living a few doors away had been recently staying, at Portsmouth, in a house where all the children had recently had Diphtheria, and 1 child had died, and these contacts came back to Southall the day of the funeral. These children had been playing with the fatal case, also with the case first mentioned in this group. I visited their home and examined the children; they appeared quite well. I was told that, whilst living in Portsmouth, they had Scarlet Fever in July, and were in Hospital 11 weeks, but they had had nothing the matter since. I took swabs from their throats, both of which proved positive, and I think there is little doubt they were the means of infecting the 2 cases mentioned, and probably also of causing infection in Tudor Road Infant School. The last case of this group

was a baby of 18 months from an adjoining road on the north side of the district. On admission to Hospital no clinical or bacterial evidence of Diphtheria was found.

GROUP 3.—Seven cases notified from December 6th to January 7th. All these patients, with one exception, were from the south side of the district. The case from the north side was found to have Diphtheritic Rhinitis on bacterial test. She was a scholar at a private school (School “A”), previously referred to, but had not been attending school for some time on account of ill health. How long the nasal trouble had been present cannot be said, but the condition is known to be usually a very chronic one, and it is not improbable she may have been concerned in conveying infection to the case mentioned in the first group in connection with this school.

Of the 6 patients on the south side 3 were cases of Membranous Croup occurring in children aged from $1\frac{1}{2}$ to 4 years. Cases of Membranous Croup were notified on December 6th, January 2nd and 7th respectively. They were all fatal cases; 2 were admitted into Hospital in a moribund condition, and survived the operation of tracheotomy only a few hours. The third case died at home and was notified the day after death.

The remaining 3 cases of this group had Faucial Diphtheria of a very mild character, 1 case only—a child aged $2\frac{1}{2}$ —being sent to Hospital, the others being treated at home. In this group of 7 there were only 2 Elementary School goers; 1 attended Dudley Road Girls’ School, the other Clifton Road Infants; in neither of which schools had any previous cases of Diphtheria been notified.

One of these patients, it should be mentioned, had been at home a month before being notified. Another case, which I should mention here, was one which came under notice from application being made to disinfect the house—a child living in the same road as one of the fatal cases of Membranous Croup. It was ascertained that this child was first ill 3 weeks previously, and the doctor pronounced it a mild attack of Diphtheria a week later; but we heard nothing of it until intimation was sent that disinfection was required, on December 20th.

In this group of cases we were unable to trace any source of infection from case to case, either by personal contact, “carrier” cases, or by milk supply.

GROUP 4.—Cases notified between January 10th and February 3rd.

On January 10th a boy, aged 4 years, was admitted into Hospital from the south side for the operation of tracheotomy. In addition to laryngeal stenosis he had extensive membrane on the fauces. It was manifestly a very grave case, and the patient died 2 days after admission.

On visiting the patient's home I ascertained the parents had removed from Greenwich to Southall on December 17th. Whilst living at Greenwich one of the children—a boy of 6—had been very ill, and had not fully recovered when they came to Southall. From the history and appearance of this child there could be little doubt his illness had been diphtheritic; and a swabbing from the throat proving positive, I had him removed to Hospital. The only other child in the family was a girl $1\frac{1}{2}$ years old; a swabbing from her throat at this time was negative, but 11 days later she developed Diphtheria, and was admitted to Hospital. None of these children had attended school in Southall. The boy of 6 had been going to school when in Greenwich.

On January 13th a young woman, aged 19—a factory worker from the south side—was admitted to Hospital with very mild Diphtheria. So far as she knew, she had not been in contact with any case of sore-throat. No one else in the house was ill, or had been ill recently. I took swabs from the throats of all the inmates, which proved negative.

On January 18th we were asked to send the ambulance for a case of Membranous Croup in a baby 15 months old—to be admitted for tracheotomy—from a house on the south side. The ambulance was sent at once, but on its arrival the patient had just died. Two families lived in this house. I found 1 child with slight sore-throat, but there was no membrane; a swabbing proved positive, and the child was sent to Hospital. Swabs taken from the rest of the inmates proved negative. Children from this house had been attending Western Road School. I visited this school, examined throats, and took swabbings from the children in the class-rooms concerned in cases where there was any suspicion; all were negative.

The rest of the cases in this group occurred on the north side of the district. Two of these cases, on January 21st and 30th, were scholars attending the private school (School "A") previously mentioned.

The first case was a mild sore-throat proved diphtheritic on bacterial test. This patient had recently been playing with another child attending the same school, who was said to have had a bad sore-throat three weeks previously. I examined this child in conjunction with the doctor in attendance; we took 2 swabs, both of which were negative. I again visited the school and examined the throats of all the children, but found nothing suspicious in any of them, and enquiries were made concerning sore-throats in absentees.

On the occurrence of the second case in this school, on January 30th, I again visited there and examined all the scholars. I took a swabbing from the throat of each one, also from the nose in several, where there was any suspicion of discharge.

Two throat swabs were returned as positive, and 2 swabs taken

from the noses of other children were also positive. There was nothing whatever in the appearance of the throats of these children to arouse any suspicion of Diphtheria. In 1 of the nasal cases there was slight excoriation of the right nostril, and in the other a watery discharge such as is seen in a common cold. I visited the homes of all these cases and examined the inmates. In the home of 1 scholar I found 2 children (not school-goers) with sore-throats, which proved diphtheritic. I had all 3 children sent to Hospital.

The inmates of the other houses where swabs were taken were all negative.

At the home of the child removed to Hospital on January 30th there had been a children's party the day previously, 14 children being present. The patient was brought downstairs in blankets to take part for a time. Nothing whatever was said to me of this when I made my enquiries, and I only heard of it incidentally a week later. I obtained the names and addresses of those present and their homes were visited. In 2 cases there was complaint of slight sore-throat, but all swabbings taken proved negative.

On January 26th a case of Faucial Diphtheria was notified from the north side ; this child, 3 years old, was not thought to be seriously ill when seen by the doctor, but he died quite suddenly about an hour after being seen. I took swabs from the other inmates of this house ; 1 taken from a little boy was positive. He developed signs of Diphtheria on January 30th, and was removed to Hospital. This boy attended Tudor Road Infant School. In connection with these 2 cases I again visited Tudor Road Infant School, examined the scholars, and took a number of swabs, which proved negative. I may here say that up to the time of writing (March 3rd) we have had no further cases notified in connection with this school.

On January 28th a girl of 16, a factory worker at Hayes, was notified from a house on the north side, and removed to Hospital. In this case bacterial tests proved negative. I took swabs from all the other inmates of the house ; all were negative except 1—a boy of 8, who attended Tudor Road Infant School. His throat appeared normal ; he had not been ill, and showed no signs of illness.

On February 3rd I saw a boy with very slight sore-throat ; a swabbing proved positive. This child attended North Road Infant School. I visited this school, examined the throats of all scholars, and took a number of swabs, all of which were negative.

GROUP 5.—On February 7th 2 cases were notified from 1 house on the south side ; both children attended Western Road Infant School. On the same day 2 other cases were notified from 1 house, also on the south side. These children attended Clifton Road Girls' and Infants' Schools. All 4 cases were of a very mild character and diagnosed from swabs only.

I visited Western Road School, Clifton Road School, and Talbot Road School. I examined the children's throats in all these schools, and took over 100 swabs, 3 only of which were returned as positive. These children were not ill, and their throats looked healthy, but each gave a history of having had a "bad cold."

On February 8th and 10th 2 further cases were notified by practitioners as the result of bacterial tests. One patient attended Talbot Road School ; the other was not a school-goer, but one of the family attended Western Road School, and a swabbing from her throat proved to be positive.

On February 11th a further case was notified from the south side. This child had a slight sore-throat, and was a scholar at Clifton Road Infant School. A few days previously she had been to tea with a child on the north side (a scholar at North Road School, who was said to have been recently ill with sore-throat). I visited the home of this child and took a swab, which proved negative.

On February 13th a case was notified from the south side, a woman aged 30 years. Two families occupied the house she lived in, and children from there attended Featherstone Road School. Swabbings from their throats proved negative.

A case of Membranous Croup on the south side was notified on February 14th. This case was fatal after tracheotomy. There were 3 other children in this house, 1 of whom attended Featherstone Road Infant School. I took swabs from the throats of all in the house, which proved negative.

I visited Talbot Road, Clifton Road, Western Road, and Featherstone Road Boys', Girls', and Infants' Schools in connection with these cases. I examined the scholars, and took a large number of swabs ; all proved negative except 2, which were positive, from Featherstone Road Boys' School, and 5 suspicious. From the Girls' School 2 were positive and 2 suspicious.

The only other case notified up to the time of writing (March 3rd) was a child of 4 years on the north side, with Membranous Croup, which required tracheotomy. Recovered. This child was not a school-goer. His brother, who attends Featherstone Road Infant School, was said to have had a sore-throat recently ; a swabbing from his throat was negative. All the other notifications relate, not to Clinical Diphtheria, but to cases in which the Diphtheria bacilli were found in the throats of children at school or at home, because of colds and slight sore-throat.

Milk Supply.

My enquiries in the different cases have embraced the Milk Supply, and I am satisfied that this has not been concerned in the spread of Diphtheria here. In by far the greater proportion of cases

milk was said to have been taken only in tea, coffee, etc., and more generally condensed milk was used than fresh milk, which was only bought in small quantities. Had the outbreak been due to milk the incidence of the disease would have been at least as great on children living in better-class houses as on those in the poorer districts; this has not been the case. However, notwithstanding negative evidence, I thought it desirable further enquiries should be made in the matter, and I submitted to the County Medical Officer a table showing the sources outside our district from which milk-vendors obtained their supply, with a view to ascertaining if there were any undue incidence of Diphtheria in other districts obtaining their milk from these sources. As a result of his enquiries the County Medical Officer assured me that in his opinion there was no suspicion attaching to milk obtained from outside sources, and I am satisfied there is none in our own district.

I have pointed out in many of my previous reports the danger of infection being conveyed by milk-cans being left at different houses by the vendors unless the cans are thoroughly scalded out before redistribution.

To obviate this possibility the different vendors have been written to, calling their attention to the importance of sterilising the cans, etc., and, further, they are notified when any cases occur on their round, and instructed not to leave cans or bottles at these houses.

Prevalence of Throat Illness.

In my monthly reports for some time back I have alluded to the prevalence of throat illness of an ill-defined character in the district; clinically it has been characterised by dryness and redness of the fauces, moderate fever, and a general feeling of illness, the symptoms clearing up in the course of two or three days.

In a few cases, with these slight local and general symptoms, there has been considerable enlargement of the glands in the neck; but in my experience this has been exceptional.

I have had swabbings taken from a number of these cases in private practice, and they have all proved negative. On examining the children in the Elementary Schools a large number complained of having had slight sore-throat, but not sufficient to keep them away from school for more than a day or two. Most of the swabbings taken from children who had recently had slight sore-throats.

I cannot but think the prevalence of this throat illness must have been concerned with the increased incidence of Diphtheria lately, probably by lowering the local resistance.

I may mention that coincidently with the increase in Diphtheria we have had an increase in the number of cases of Scarlet Fever in

the district. Since this disease has probably a local origin like Diphtheria, it is not improbable that the increased prevalence of Scarlet Fever may also be due to the same cause. However this may be, I have noted in previous outbreaks that there has been a close association between ill-defined throat illness on the one hand and Scarlet Fever and Diphtheria on the other. There has been no evidence in any Diphtheria case of infection having been derived from any of the lower animals.

Sanitary Circumstances.

As already said, there have been very few cases in the better-class houses in the district. This is due to the fact that children from these houses do not attend the public Elementary Schools, and not to better sanitary circumstances. Every house from which a case has been notified has been visited, and the sanitary condition of the premises investigated, and where defects were found these have been remedied. In one or two cases the premises were in a bad condition, owing to the dirty habits of the tenants; but, generally speaking, we have not found any sanitary defects of moment.

Isolation.

All serious cases have been treated at the Isolation Hospital, but "carrier" cases have been isolated at home—as far as it is possible to do so.

These cases have been notified as cases of Diphtheria, but it seems to me a question whether a child perfectly well in all respects, but having Diphtheria bacilli in the throat, really comes within the Notification Act. I consider a modified form of notification is required for these cases.

Disinfection.

Disinfection has been carried out in all clinical cases; but this seems to me useless in "carrier" cases, for the child may have been harbouring bacilli in the throat for weeks, and any effective measures would necessitate disinfecting everything in the house, which is impracticable.

Work in Connection with the Schools.

As already mentioned in the body of the report, I have systematically visited all the Elementary Schools and one private school in the district, and examined the children and swabbed the throats where there was any suspicion attaching.

I have taken all together approximately 250 swabbings up to date.

The number of visits I have paid and examinations made in the various schools are as follows:—

Number of Visits to each School, and Number of Swabs taken up to date, February 27th, 1914.

Schools.	Visits Paid.	Swabs Taken.
Private School (School " A ")	4	19
Western Road Girls	4	21
Western Road Infants	4	22
Clifton Road Girls	3	22
Clifton Road Infants	3	29
Talbot Road Boys	2	17
Featherstone Road Boys	2	52
Featherstone Road Infants	4	15
Dudley Road Girls	3	19
Tudor Road Infants	5	38
North Road Infants	2	12
	36	266
<i>Numbers Returned as Positive.</i>		
School " A " (Private)		3
Western Road Girls		1
Talbot Road Boys		2
Featherstone Road Boys		3
Dudley Road Girls... ..		2
		11
<i>Numbers returned as Suspicious.</i>		
Western Road Infants		2
Clifton Road Infants		2
Dudley Road Girls... ..		2
Featherstone Road Boys		5
		11

SOURCES OF MILK SUPPLY ENQUIRED INTO.

Hetherington,	Own cattle.
High Street.	
Keevil, C. H.,	Wiltshire Farmers, Ltd., Chippenham,
High Street.	Wilts.
Middlesex Creamery.	Grabham, Mr., Hayes Home Farm,
	Hayes, Middlesex.
	Clarke, Mr., Osborne Farm, Upper
	Minety, Wilts.
	Carey & Grimdell, Dorchester, Dorset.
	Dairy Supply Co., Museum Street, W.C.
	A little occasionally from Otto Monsted,
	Ltd.

Pool, Manor Parade.	Pool, Mr., Down Barns Farm, Hayes.
Roe & Silcox, Western Road.	Butler, Mrs., Bramley, Hants. James, Captain, Minety, Wilts. Brown, Mr., Woolhampton, Midgham. Roe, Mr. Mulberry Farm, West Pen- nard, Glastonbury, Somerset.
Sulman, A. Featherstone Road.	Wiltshire United Dairy Co., Baker's Lane, Ealing, W.
Underwood, Western Road.	Wiltshire Farmers, Ltd., Chippenham, Wilts.
Whatley, Western Road.	Pool, Mr., Down Barns Farm, Hayes ; also a little from Dairy Supply Co., Museum Street.
Willison & Henman, King Street.	Maggs, Mr., Foulscote Manor Farm, near Wallingford.
	Willison, Mr., Norwood Green Farm, Southall.

MEASLES.

During the early part of the year Measles was very prevalent throughout the district, and occasioned 17 deaths. At first, early in January, it was confined to the south side of the district ; by the end of February it had spread to the north side, the incidence being chiefly on children attending Tudor Road Infant School. The complaint continued to spread during March, and from my own observation I should say very few children escaped the illness who had not previously had it. There were many instances of children having a second, and some a third, attack. There was also an exceptionally large number of adult patients attacked. On its first appearance the complaint was of a mild character, but at the height of its prevalence was of a much worse type, and a large number of cases were complicated with Broncho-pneumonia, to which many of the deaths were ascribed. I have already alluded to the fact that the concurrence of Scarlet Fever and Measles was probably a means of spreading the former disease, owing to it being mistaken for Measles.

The control of Measles is extremely difficult owing to its being highly infectious before definite symptoms of illness appear. When one child of a family develops the complaint the rest who have not already had it will almost certainly contract it. Children attend school in the early stage, and no precautions appear to be of any avail. Perhaps closing a school when the first case appears may limit the incidence, but it is an impracticable measure.

ANTITOXIN.

The Council keep antitoxin for the use of practitioners, which is available day and night on application at the Town Hall. It is

supplied free for necessitous cases. During the year it was applied for only in 8 cases out of a total of 45 notified. The Council hope practitioners will avail themselves more freely of this remedy in future. It is highly necessary it should be administered during the first 24 hours, where there is any suspicion of Diphtheria. If delayed longer than this its power for good is much lessened.

EXAMINATION OF SWABS.

The Council continue to pay for the examination of swabs from suspicious cases of Diphtheria. The number submitted by practitioners is small in comparison to the number of notifications, which is probably explained by the neglect of parents to seek medical advice in cases of slight throat illness.

NOTIFICATIONS OF DIPHTHERIA, 1891-1913.

	Estimated Year.	Estimated Population.	Number of Cases.	Deaths.
Census ...	1891	5,523	5	3
	1892	5,523	9	1
	1893	5,791	18	7
	1894	6,117	15	6
	1895	6,684	7	2
	1896	7,184	4	2
	1897	7,913	88	3
	1898	8,531	80	15
	1899	9,311	111	11
	1900	11,199	44	15
Census ...	1901	10,365	11	2
	1902	12,680	20	3
	1903	13,832	60	6
	1904	15,737	19	2
	1905	17,712	27	2
	1906	18,777	27	1
	1907	21,352	24	4
	1908	22,371	14	1
	1909	23,291	38	3
	1910	24,000	4	2
Census ...	1911	23,522	25	3
	1912	25,860	43	2
	1913	26,075	45	7

SECTION IV.

(a) ISOLATION ACCOMMODATION.

(1) Accommodation is provided at the Isolation Hospital for cases of Diphtheria and Scarlet Fever only. The Pavilion Block, which is used for Scarlet Fever, consists of two large general wards and an emergency ward, with a nurses' duty-room and kitchen situated between the large wards. Additional accommodation is provided by a Berthon Circular Hospital at the rear of the Pavilion Block, which has proved of service for convalescent patients. The Diphtheria patients are treated in the Isolation Block, which consists of two wards with accommodation for eight children.

There is no hospital for Small-pox in the district.

It is probable in the near future that the question of providing accommodation for cases of Enteric Fever will arise, since most of the general hospitals are reluctant to take these cases in. It is essentially a disease which requires hospital treatment, both from a curative and a preventive point of view, unless the patient's domestic circumstances are exceptionally favourable.

(2) *Nursing Staff*: The permanent staff at the Isolation Hospital is as follows: Matron, head nurse, three probationer nurses, and ward maid. In the Administrative Buildings: Cook, housemaid, and laundry maid. Lodge: Man and wife (the man acts as gardener, attends to the boilers, and works the disinfecting apparatus, etc.).

(3) *Ambulance Arrangements*: The ambulance is of the Brougham pattern, containing a stretcher-bed, which takes out at back, seat for the nurse, etc. The vehicle is kept at the Hospital and horsed by contract.

The Inspector has charge of the arrangements for removal of the patients from their homes to the Hospital. One of the nurses goes with the ambulance for every case, and is provided with requisites for any probable emergency which may arise on the journey.

(b) METHODS OF DISINFECTION.

(1) In all cases the work of disinfection is done at the cost of the Council, under the supervision of the Sanitary Inspector.

As to Rooms: The procedure adopted in disinfecting rooms is as follows: In all cases the room occupied by the patient is sealed and fumigated with sulphur-dioxide gas, cylinders of compressed gas being used. In cases which have been treated at home, and in others kept at home for some days before removal to the

EXPENDITURE.

I am indebted to Mr. Burwell for the following particulars of expenditure on the Sanatorium for the year 1913.

	1913.		1912.		1911.		1910.		1909.	
	£	s. d.	£	s. d.	£	s. d.	£	s. d.	£	s. d.
Salary, Wages, etc.	435	12 2	391	16 0	437	16 9	383	9 1	372	16 8
Provisions ...	331	16 5	271	19 0	269	11 5	167	17 6	211	9 2
Fuel, Light, Cleaning ...	169	16 11	166	14 5	155	15 11	174	0 9	117	1 3
Dispensary, Medical and Surgical	49	1 4	23	9 9	80	9 1	21	9 0	44	9 5
Rates, Taxes and Insurance ...	49	12 4	48	6 1	45	18 3	46	18 9	45	3 7
Establishment Charges ...	102	14 3	98	11 6	76	11 10	50	7 2	62	18 0
Repairs and Maintenance	39	19 4	53	15 11	95	17 6	54	3 11	36	12 3
Repayment of Loans and Interest	738	15 11	759	13 0	769	11 2	779	7 4	779	14 2
Capital Charges ...	25	10 0	5	8 0	117	0 0	—	—	9	16 0
	1942	18 8	£1819	15 8	2048	11 11	1677	13 6	1700	0 6

	1908.		1907.		1906.		1905.		1904.	
	£	s. d.	£	s. d.	£	s. d.	£	s. d.	£	s. d.
Salary, Wages, etc.	386	19 2	386	8 4	434	9 5	412	15 10	481	0 0
Provisions ...	189	12 9	174	16 4	261	1 8	277	13 3	361	0 0
Fuel, Light, Cleaning ...	134	18 5	134	9 3	165	7 11	191	2 3	155	0 0
Dispensary, Medical and Surgical	47	1 11	51	16 9	83	11 2	43	9 0	50	0 0
Rates, Taxes, and Insurance ...	51	18 5	45	0 11	46	7 8	42	3 8	43	0 0
Establishment Charges ...	87	12 5	63	19 6	87	10 1	79	18 3	114	0 0
Repairs and Maintenance...	58	13 8	41	17 4	—	—	69	5 3	—	—
Repayment of Loans and Interest	816	18 9	794	15 5	821	16 10	835	19 5	827	0 0
Capital Charges ...	—	—	29	8 6	33	16 6	22	10 10	433	0 0
	1773	15 6	1722	12 4	1934	1 3	1974	17 9	2464	0 0

Hospital, the fumigation is followed by scraping and stripping of all paper from the walls. This is not done, as a rule, when the patient is removed to the Hospital within a day or so of the commencement of the illness.

In all cases the walls, floor, and ceiling are thoroughly brushed over, and the woodwork and fixtures washed with solution of chloride of lime. Where possible the room is not occupied for a week, windows in the meantime being kept widely open.

(2) *As to Articles of Clothing* : The clothing, bedding, curtains, and all infected articles, which can be removed, are taken to be disinfected in the Thresh's apparatus at the Hospital. Two covered hand-trucks—one for infected and one for disinfected articles—are used for transport.

ISOLATION HOSPITAL.

There were 113 patients admitted during the year. Of these 87 were sent in as Scarlet Fever and 26 as Diphtheria. The following table gives the numbers admitted and discharged each month.

	Number Admitted.		Number Discharged.		Deaths.
	Scarlet Fever.	Diphtheria.	Scarlet Fever.	Diphtheria.	
January	4	1	2	1	—
February ...	12	1	4	1	—
March	1	2	13	1	1
April	2	2	3	0	—
May	2	1	1	3	—
June	1	0	2	1	—
July	13	1	0	0	—
August ...	5	0	4	0	—
September...	6	5	16	1	—
October	20	2	7	5	—
November...	7	8	18	0	2
December ...	14	3	6	3	1
Totals ...	87	26	76	16	4

The majority of Scarlet Fever cases were of a very mild type, and convalesced without complications of any kind. A number of these patients, although their illness had been so slight, developed rhinorrhœa, many of them just about the time they should have been discharged, and the persistence of this condition necessitated in some cases an unusually prolonged period of isolation. I make it a rule not to discharge cases until at least six weeks have elapsed since the beginning of illness, because I have found that infectious discharge from the nose often does not show itself until the fifth or sixth week. My experience of return cases is that occasionally it develops for the first time at an even later period than this.

During the outbreak of Measles in the early part of the year the complaint was introduced into the Hospital, and seven of the patients contracted the disease ; all, however, made good recoveries.

Of the patients admitted with Diphtheria, four proved fatal. In two cases, tracheotomy was required immediately on admission ; in both, however, it was manifest that the operation could only prolong life for a few hours. Of the two fatal cases of Faucial Diphtheria one was obviously moribund on admission ; the other case was seemingly doing well ; no untoward symptoms except an irregular pulse, due to the condition known as heart block, was present. The child died suddenly and unexpectedly.

The stay in hospital of some of the children was unduly prolonged because of the persistence of Diphtheria germs in the throat.

We make it a rule not to discharge a child until three successive *negative* cultures, taken at some days' intervals, from the throat are obtained. This seems to be an efficient standard of non-infectivity, for as yet we have had no return case.

SECTION V.

GENERAL SANITARY MATTERS.

HOUSING ACCOMMODATION.

There has been less building recently in the district, particularly of working-class dwellings, than for many years past. The number of new houses erected during the year suitable for the working classes was 63, a growth which is not proportionate to the population. The Council has had this matter under consideration a considerable time, and after a lengthy enquiry the Local Government Board decided that 50 working-class houses should be built by the Council. For this purpose $9\frac{1}{4}$ acres of land in Western Road and $\frac{1}{4}$ of an acre in Norwood Road have been purchased, and the Surveyor has received instructions to prepare a scheme for the erection of 54 cottages on these sites.

Generally speaking, the cottages in the district are well built and conveniently designed ; the rents prevailing for single houses, however, are more than a working man with a family, earning from 30 to 40 shillings a week, can afford. To meet the demand for cheaper dwellings, a number have been built on the south side, to accommodate two families, and many houses throughout the district, constructed primarily as single houses, have been converted into two tenements.

All new buildings have to conform to bye-laws based on the model Bye-laws of the Local Government Board, which ensure a minimum standard of open space about the house, size of rooms, amount of light, sanitary conveniences ; that foundations are properly laid, the materials used of a certain quality, and so forth. In order to ensure this minimum standard and to avoid any breach of the Bye-laws, buildings in course of erection are constantly supervised by the Surveyor and the Building Inspector.

In this connection our Surveyor writes as follows : “ Careful inspection is continually being made of the houses in course of erection, and plans kept showing the drainage of each house. It is seldom necessary now to compel the builders to rectify works done in contravention of the Bye-laws.”

PLANS APPROVED BY THE COUNCIL, 1913.

Houses and Shops	...	70	Factories and Additions	5
Stables	...	2	Alterations and Additions	19

HOUSES CERTIFIED FOR OCCUPATION, 1913.

Houses and Shops	...	...	59
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DWELLING HOUSES ; ACTION UNDER HOUSING AND TOWN-PLANNING ACT, 1909.

Number of houses dealt with under Section 15	...	...	None
Number of houses found to be in a state dangerous or injurious to health (Section 17)	...	...	98
Number of representations made by M.O.H. (Section 17)	...	...	3
Number of closing orders made by Local Authority (Sect. 17)	...	...	3
Number of houses closed voluntarily	...	...	1
Number of closing orders determined after repairs (Sect. 17)	...	...	3
Number of houses demolished—			
(a) By order of Local Authority (Sect. 17)	...	...	None
(b) Voluntarily	...	...	None
Illegal underground rooms vacated	...	...	None
Houses inspected from house to house (Housing and Town Planning Act)	...	...	287
Number of houses made habitable without closing orders	...	...	94

INSANITARY PROPERTY.

The following are the particulars of the different groups of insanitary houses dealt with during the year :—

HAMMOND ROAD, Nos. 37, 37a, and 39.

The first two houses named were in a very dilapidated condition, and had been unoccupied for the greater part of two years. The roofs were leaky, the walls saturated with dampness, and the rooms in a dirty state throughout, all the fire grates being practically broken and useless, and the outside wooden staircase rotted and dangerous. The yard was unpaved and in an insanitary condition, and the drains blocked. No. 39 was occupied, and there the roofing was also defective, and the guttering and downspouts to same, also the drain ventilator. Drainage blocked and yard unpaved. Internally some of the rooms were dirty, also passage and staircase, and the floors in a defective condition.

A preliminary notice was served on the owner, but nothing was done as a result of same, and proceedings were then taken under Section 17 of the Housing and Town Planning Act, 1909, and closing orders made with respect to each house.

The property was eventually thoroughly repaired and done up by the owner, and the closing orders determined by the Council.

HAMMOND ROAD, Nos. 29, 31, 33, and 35 ; Nos. 29a, 31a, 33a, and 35a.

Several rooms in this block were found in a dirty state, the wall plaster badly broken, and two of the w.c.'s out of order. The yards were in an insanitary condition, being unpaved. The premises were done up as required and yards paved.

HAMMOND ROAD, Nos. 108 to 128 and Nos. 108a to 128a (26 Flats).

The ground floor front rooms (12 houses) were all more or less in a damp condition, which percolated the outer wall, in front of and alongside the bay windows. Excavations were made down to the foundations, and the walls were rendered externally in cement from the foundations to a height well above the ground level.

The yard paving was in a defective state : this was repaired and made good, also defects to roof guttering and downspouts.

Several of the rooms were in a dirty condition and the w.c.'s out of order.

HAMMOND ROAD, Nos. 85, 87, 89, 91, and 95.

Dampness existed in some of these houses, chiefly by reason of the garden earth being banked against the external wall, and above damp-proof course level. Some of the rooms were in a dirty condition, also w.c.'s and sink waste-pipes out of order.

HAMMOND ROAD, Nos. 97, 99, 101, 103, 105, 107.

Defective and blocked roof guttering and paving defective. Several rooms also in a dirty state, which were all cleansed and done up as required.

HAMMOND ROAD, Nos. 50, 52, 54, 56, 58, 60, 62, 64, 66, 68.

Yards unpaved and in an insanitary condition. Sink-pipes and gully traps out of order, w.c.'s fittings defective, and several rooms in a dirty condition, which have since been cleansed and done up and yards paved.

CLARENCE STREET, Nos. 75, 77, 79, 81, 83, 85.

These houses were in a bad state of repair generally: the yards were unpaved and fences broken down.

Three of them were in a dirty state throughout, and two were very damp from defective guttering and stack-pipe.

They were cleansed and repaired.

CLARENCE STREET, Nos. 116, 118, 120, 122, 124, 126, 128, 130.

Yard paving defective, and several of the back external walls showed signs of dampness from defective window-sills. Some of the rooms dirty, also w.c.'s out of order. These were repaired and made good.

CLARENCE STREET, Nos. 68, 70, 72, 74, 76, 78, 80, 82.

Insanitary condition of yard paving. Roofing defective in some instances, and also signs of dampness.

W.C.'s out of order, also some of the rooms at two of the houses were in a dirty state. These were repaired and done up.

CLARENCE STREET, Nos. 87, 89, 91, 93, 95, 97.

Roof guttering defective, also downspouts; w.c. out of order at one house, also drains blocked; several rooms in a dirty condition. The external repairs are completed, but in some instances the internal repairs and cleansing are pending the removal of some of the tenants very shortly.

CLARENCE STREET, Nos. 7, 9, 11, 13, 15, 17, 19, 21.

Very damp condition of the rear external walls. Downspout drains blocked and w.c.'s out of order, also defective and blocked roof guttering and broken yard paving.

The sinks in six houses had been placed in a very bad position inside the food cupboard. These were removed into the scullery, also repairs to w.c.'s, guttering, downspouts, and yard paving carried out, and the rooms done up internally as required.

CLARENCE STREET, Nos. 18, 20, 22, 24, 26, 28, 30, 32.

Insanitary condition of yards, which were unpaved. Defective w.c. fittings and sink waste pipes. Several of the rooms were in a dirty state, wall plaster defective, and floor broken. These repairs are now almost completed.

SPENCER STREET (FLATS), Nos. 18, 20, 22, 24, 26, 28, and Nos. 18a, 20a, 22a, 24a, 26a, 28a.

Insanitary condition of yards, which were unpaved, rain-water drains blocked, and defective w.c. fittings. Several rooms were in a dirty state, also staircases and passages. Repairs and doing up of the premises carried out, also yards paved.

**MOUNT PLEASANT COTTAGES, NORTH HYDE COMMON,
No. 1 to 17 (17 houses).**

The front external walls damp, also roofing defective. Floorboards rotted and several rooms in a dirty state. Yards unpaved to five of these houses.

The front external walls were rendered in cement from the foundations to a height well above the ground level, floors repaired, and rooms cleansed and done up as required, also yards paved.

RICHMOND COTTAGES, Nos. 1, 2, 3, 4, 5, 6, 7, 8.**BOAT COTTAGES, Nos. 1, 2, and 3.**

(North Hyde.)

The closet accommodation was of a very insanitary nature, the receptacle being a large "pit" constructed under the floor of each closet, which was cleansed by the owner at rare intervals.

The "pits" were thoroughly cleaned out and filled up with suitable material, and converted into "pail closets," as no sewer is available in this neighbourhood.

ADELAIDE COTTAGES (CANAL SIDE), Nos. 1, 2, 3, 4, 5, 6, 7.

These houses were all more or less damp along the external walls, and the yards unpaved. The w.c.'s were not supplied with water, being hand-flushed, and no ventilation provided to the drainage, or proper covers to the inspection chambers.

Several of the houses were in a dirty state, and the floors more or less defective.

The walls along the foundations and upwards above ground level have been rendered in cement, the yards paved, drainage ventilated, flushing cisterns fixed to w.c.'s, and the rooms done up internally as required, and floors repaired or renewed entirely.

No. 1.—The owner has decided not to let this again for occupation as a dwelling.

SUSSEX ROAD, Nos. 7, 9, 11, 13, 15, 17.

The yards, also front entrance pathways, unpaved and in an insanitary condition.

The roof guttering, also stack-pipes, blocked or defective. This property has been repaired and done up externally.

Several rooms in a dirty state, which are now being dealt with.

TALBOT ROAD, Nos. 2, 4, 6, 8.

Defects found to w.c. pans, and cement work around sink gully traps. Defective guttering, and water cisterns not provided with a cover. Several rooms in a dirty state. Repairs carried out and rooms done up.

HAMBROUGH ROAD, Nos. 40, 42, 44, 46, 48, 50.

Several rooms were found in a dirty state, also defects to roof guttering, causing dampness. The repairs were carried out and rooms done up internally as required.

In addition to the foregoing, several groups of houses were inspected during the year, which do not call for any special comment, as the defects found were of a minor character, and in some instances were abated upon verbal notice being given to the owners concerned.

OVERCROWDED HOUSES.

Ten instances of overcrowding came under notice during the year, and all were abated. Two were in the East Ward, eight in the West Ward. In eight instances there were two families occupying one house; two cases were investigated as the result of complaints made; the remainder were noted during inspection of the district.

MOVABLE DWELLINGS.

There have been more van dwellers in the district than last year, twenty-six instances coming under notice. Nuisance was occasioned in six instances, and notice served on the occupiers, also on the owners of the land, to abate the same.

CANAL BOATS USED AS DWELLINGS.

The following is Mr. Wood's report on the inspection of canal boats during 1913 :—

Number of Boats Inspected	...	...	...	...	...	29
„ „ Special Visits to Canal for Inspection	...	...	...	...	...	23
„ „ Visits in which Inspections were made	...	...	...	...	...	17
„ „ Boats found with Infringements	...	...	...	...	...	6
„ „ Boats found without Infringements	...	...	...	...	...	23
„ „ Infringements Remedied	...	...	...	...	...	6
„ „ Boats worked by men only	...	...	...	...	...	7
„ „ Boats having women and children on board	...	...	...	...	...	22

NATURE OF INFRINGEMENTS :—

Boats Requiring doing up and repainting	...	...	...	...	...	4
„ in which the Certificate did not identify the owner with the boat	...	...	...	...	...	1
„ Certificate dilapidated and undecipherable	...	...	...	...	...	1

There appears to be an improvement in the general upkeep of the Boats, both structurally and in matters of cleanliness. I am pleased again to report that no case of Infectious Disease has been found on any of the boats visited, and that the health of the occupants was very satisfactory so far as any ordinary sickness was concerned.

COMMON LODGING-HOUSES.

There are no common lodging-houses in the district.

HOUSES LET IN LODGINGS.

There are now no premises in the district which come under the Bye-laws. The houses previously registered are now let as flats, each tenant having free access at all times to his own rooms.

HOUSE-TO-HOUSE INSPECTION.

The Inspector has done very good work in the systematic inspection of the district from house to house, 287 premises having been inspected. When a complaint is received of overcrowding or insanitary conditions in a dwelling-house, he examines the whole block of property in question, and in several cases the entire street or road : this has been done more particularly on the occurrence of infectious disease in any of the houses. The total number of houses inspected was 3,295.

PUBLIC ELEMENTARY SCHOOLS.

School.	Department.	Authorised Accommodation.	Average No. on Rolls during Month, Dec., 1913.	Average Attendance.	Percentage of Average Attendance on No. on Rolls.
I.—South of Railway.					
Featherstone Road	Boys'	800	663	603	91·
Clifton Road	Girls'	400	397	330	83·1
Dudley Road	Girls'	400	394	327	82·9
Clifton Road.....	Infants'	400	399	319	83·7
Featherstone Road	Infants'	374	378	316	83·4
Clifton Road.....	Boys'	420	431	383	88·9
Western Road	Girls'	400	327	288	88·6
Western Road	Infants'	400	299	258	86·3
St. John's	Special.....	120	40	35	87·5
II.—North of Railway.					
North Road	Mixed..	*58 } 239 }	305	265	87·1
Tudor Road.....	Senior (Mixed)...	400	†423	386	91·3
Tudor Road	Juniors'	400	†414	369	89·1
North Road	Infants'	247	274	247	90·
Tudor Road.....	Infants'	400	†419	353	84·2
Totals		5458	5163	4479	86·7
Corresponding month of last year.		5458	4961	4356	87·8

The sanitary condition of the premises is satisfactory ; they are all properly drained, and supplied with water from the public service. There are only six small private schools in the district.

OPEN-AIR BATH.

This Bath was erected in the early part of 1913, and opened to the public in May, 1913. The Bath is situate at the Recreation Ground, Southall Green. It is 120-ft. in length, 30-ft. wide, and the depth of water varies from 3-ft. to 6-ft. The water is supplied from the mains of the Metropolitan Water Board. There are 20 dressing boxes, an open dressing shed, attendant's office, men and women's conveniences, and stores. The charge for use of Bath is: Adults 2d., children 1d. Special days are set apart for women.

UNDERGROUND CONVENIENCE.

An Underground Convenience is being constructed under the forecourt of the Town Hall. It contains accommodation for both sexes. On the women's side there are 4 w.c.'s and "wash-up" place, and on the men's side 3 w.c.'s, a 6-stall urinal, and "wash-up" place.

WATER SUPPLY.

The principal water supply for the district is that of the South West Suburban Water Company, whose reservoirs are at Egham. A considerable number of houses at North Hyde and on the Adelaide Estate are supplied from the mains of the Metropolitan Water Board. There are only a few isolated houses and groups of cottages in the district which obtain water from wells. The South West Suburban Company have a water tower on their premises at Southall with a capacity of about 300,000 gallons in order to ensure a constant supply. The Council have the water from the public supply periodically analysed, and on the whole the reports during the year have been satisfactory; but at times it is intimated that more efficient filtration is desirable. The latest analyses are the following :

Copy of Analysis.

NORWOOD CHEMICAL WORKS,
SOUTHALL.

Certificate of Analysis of a Sample of Water.

Received from Main Supply, South West Suburban Water Co.

Appearance	...	Bright and clear.	
Colour	... ..	Light yellow.	
Smell...	... ..	Very slightly earthy	
			Parts per 100,000.
Total Solids at 100° C.	... ..		32·8
Total Solids ignited	... ..		27·2
Chlorine	... ..		1·813
Nitric Acid	... ..		·596
Nitrous Acid	... ..		Nil.
Oxygen absorbed	... ..		·200
Ammonia free	... ..		·0079
Ammonia Albuminoid	... ..		·0182
Lead or Copper	... ..		Nil.

Slight charring of solids on ignition.

From consideration of the above results I am of the opinion that this water is of medium quality for drinking and domestic purposes.

B. E. HOULDER.

Copy of Analysis.

NORWOOD CHEMICAL WORKS,
SOUTHALL.

Certificate of Analysis of a Sample of Water.

Received from Southall Urban District Council.

Marked, " Sample of Water from the Main : Metropolitan Water Board."

Appearance	...	Bright and clear.	No sediment on standing.
Colour	... ..	Very light yellow.	
Smell	... ..	Nil.	
Total Solids at 100° C.	... ..		Parts per 100,000.
Total Solids ignited	... ..		42·40
Chlorine	... ..		35·80
Nitric Acid	... ..		1·701
Nitrous Acid	... ..		1·840
Oxygen absorbed	... ..		Nil
Ammonia free	... ..		·080
Ammonia Albuminoid	... ..		·0005
Taste	... ..		·010
Lead	... ..		Nil

From consideration of the above results I am of opinion that this water is of first-class purity for drinking and domestic purposes.

B. E. HOULDER.

SEWERAGE AND DRAINAGE.

Method in use in the district : Water-carriage system.

The rainfall is conveyed by separate sewers to the natural watercourses. Practically all the houses in the district are drained into the public sewers, except a group of cottages and a few isolated houses adjoining the Canal at Top Locks. Building operations are proceeding in the vicinity, and it is probable that in the near future the sewers may be extended to drain this area.

I am indebted to our Surveyor and Engineer, Mr. Reginald Brown, M. Inst. C.E., for the following particulars :—

The Sewage enters the Disposal Works at two different points. What may be termed the high-level outfall sewer takes the sewage from the District proper. This enters the works by passing through a small chamber controlled by valves, and thence into and through a receptacle in which is fixed one of Smith's Patent Revolving Wire Screens.

This screen consists of a water wheel—driven by the momentum of the sewage—which causes an endless band of wire net to revolve slowly, thus catching and lifting all suspended matters beyond a certain size. A brush revolving in an opposite direction cleans the net as it passes, and the solid matters are cleared to one side and removed by manual labour. The sewage then passes through a well, inside the liming house, and thence through two valves into one or the other of two small detritus tanks covered with corrugated iron. These tanks have a total capacity of 24,000 gallons. At the centre of the length of these tanks scum boards are fixed, the bottom edges of which are at a distance of 24-in. below the level,

the upper edges being above the water level ; the outlet end of the tanks have also scum boards projecting to a distance of 12-in. below the water level, and the top edges of same, of course, being above the water level.

The sewage passes under these boards and over a lip in a continuous stream into a carrier.

Four Precipitation Tanks, of 600,000 gallons capacity, are in use, with the necessary apparatus in connection therewith. The tanks are arranged so that they may be used on the intermittent or continuous principle.

The lower outfall takes the sewage from one institution only, viz., Hanwell Asylum, and discharges into two covered tanks, the combined capacity of which is about 57,000 gallons. The sewage from these tanks is pumped up through a rising main, and discharges into a well at the liming house before mentioned, and then passes through the same process as the District sewage. The precipitated sludge passes into a sludge well near the low-level tanks, and is pressed into cake form by means of three filter presses.

Some ten years ago about three-quarters of an acre of first contact were constructed, but owing to the phenomenal growth of the district further extensions have recently been carried out. These extensions take the form of ten percolating beds, one 40-ft. diameter, one 60-ft. diameter, and eight 80-ft. diameter, and the whole of the tank liquor is dealt with on these beds, the result being a good effluent.

The whole of the machinery at the works is driven by gas engines, the gas being obtained from the town mains. It is also hoped that the Company's water will be laid on to the farm at no very distant date.

REMOVAL OF HOUSE REFUSE.

During the year 3,963 loads of refuse have been removed from the houses in the District. The system in vogue is a weekly collection, the refuse from each house, except where unavoidable, being removed once a week, on specified days. The refuse of the house is stored in galvanised iron bins, supplied by the Council, which, when emptied, are dusted with carbolic powder. The dust is removed by means of covered carts with wind guards.

The work is carried out by contract at a rate per day for horse, harness, and man ; the Council supply the cart and one dustman. The District is divided into three Sub-Districts for the purposes of collecting, and reports are made daily to the Surveyor as to the progress of the work for each of these Sub-Districts. It is a pity that with such an efficient method for the removal of refuse the method of disposal is so primitive.

Owing to the difficulty in finding shoots in the District, the refuse is deposited under contract outside the District. This practice

is to be deprecated, and the time cannot be far distant before a more up-to-date and modern system of disposal is adopted.

(a) *Cowsheds.*

MILK SUPPLY.

The number of cowsheds on the register is 7 ; the number of milch cows in these sheds is 169. All the sheds are situated on farm land on the outskirts of the district, and in no case are the cattle kept continuously stalled. The general sanitary state of the premises is, on the whole, satisfactory : they are well lighted and ventilated ; all have a sufficient water supply, and are kept in a cleanly state. It is more particularly with regard to the regulations relating to the cleanliness of cattle and persons engaged in milking that there is at times cause for complaint.

There has been no suspicion attaching to the milk from the cowsheds in the district in cases of infectious sickness. The milk from the majority of the sheds is sent to milk shops outside the district. Two only of the milk sheds supply milk shops in the town. I again urge the desirability of a periodical veterinary inspection of the milch cows in the district. The Council have considered this matter, and they concluded that it could be more efficiently carried out under the auspices of the County Council. I am quite in agreement with this view, and hope that some means will be found whereby the County Council can arrange to have such inspection carried out.

Notice was received from the County Council under the Tuberculosis Order, 1913, of the suspected existence of disease at one of the local cowsheds. The owner notified that he was suspicious of tuberculosis in one of the animals. The County Veterinary Inspector reported as follows : " The animal was a cow in milk, suspected of tuberculosis, with emaciation—udder normal. Examined milk with negative results. The cow was to have been tested with tuberculin, but her temperature remained too high. Owner decided to kill the cow and not to ask for compensation. I attended, and made a post-mortem examination, and found a few tuberculous lesions in one lung and one kidney ; I do not attribute the emaciation to tuberculosis. No other animal suspected. I examined all the bovine animals kept on the homestead."

(b) *Milk Shops and Dairies.*

There are 32 registered milkshops and dairies in the district : a good many of these sell milk in small quantities over the counter only. On the whole the regulations of the order are efficiently carried out, the combined milk shops and dairies are really well kept, and their state as regards cleanliness and so forth is all that could be desired. All the premises have been frequently inspected and special visits have been paid to particular shops supplying houses in which infectious sickness has occurred. There have

been no facts pointing to the milk supply from any dairy being concerned in the spread of infectious sickness. As a means of protecting the milk supply from infection the vendor supplying a house from which infectious sickness is notified is instructed to deliver milk at that house only into a receptacle provided by the customer. In previous reports I have adverted to the dangerous system of distributing milk to houses in dealers' cans. I consider there is great risk when these are left at a house where there is infectious sickness. The regulations provide that cans must be effectively cleansed after use, and the Council insist on provision for this being done at all dairies ; but I am sceptical as to the regulation being systematically observed.

INSPECTION OF FOOD SHOPS.

The Inspector pays close attention to meat exposed for sale in the butchers' shops, and reports that the quality of meat is good, and that the premises are kept in a satisfactory condition.

BAKEHOUSES AND BAKERS' SHOPS.

The bakehouses in the District are kept under supervision. All these premises are satisfactory as regards cleanliness, ventilation, lighting, etc. Only minor contraventions of the regulations came under notice during the year.

SLAUGHTERHOUSES.

The Inspector visits these premises every slaughtering day and examines the carcasses. The sanitary condition of the slaughter houses is satisfactory. Structurally there is room for improvement in many cases ; all the premises, with one exception, have been adapted to their present use.

SALE OF FOOD AND DRUGS ACT.

Butter and Milk.

Twenty-seven samples of milk were taken during the year. Upon analysis 1 sample was found to contain 11 per cent. added water. Legal proceedings were instituted against the vendor. It was stated in evidence that the milk was obtained from a farm near Reading, and that the milk-cooling apparatus was in a leaky condition. This was the explanation given of the adulteration. A warranty was also pleaded, and the magistrates dismissed the case. Five other samples obtained did not come up to the standard required by the Board of Agriculture ; each sample contained added water, but, the percentage being low, no proceedings were taken ; 1 sample contained 2 per cent. added water, 2 contained 3 per cent.

and 2 contained 4 per cent. In each case the County Analyst made his report on a blue form, which denotes he did not recommend action being taken with regard to the samples, but a letter of caution was sent to the vendors by the Council. Six samples of milk were taken by request of Messrs. O. Monsted, Margarine Works, from churns of milk suspected to contain preservatives. As their own analyst failed to find any evidence of any preservative being used, the samples were not submitted to the County Analyst.

UN SOUND FOOD.

In January a cow in process of slaughter at Clifton Road Slaughterhouse was found to be affected with tuberculosis. This was confined chiefly to the internal organs, which were surrendered with a portion of the carcase : these were removed from the premises and destroyed. In October the inspector was asked to examine a carcase which he found to be affected with generalised tuberculosis. This animal had been sent from a farm outside the District, where it had been previously examined and regarded as a "suspect" by the County Veterinary Inspector. A quantity of wet and dried fish has also been destroyed as being unsound and unfit for food, including five boxes of dried haddock and a trunk of mackerel. It frequently happens that the fish is apparently sound when seen in the wholesale market, but when properly opened out upon arriving at its destination it is found quite unfit for food. The purchaser, upon surrendering the same for destruction, is given a certificate whereby he may reclaim the amount paid, or its equivalent value, from the merchant.

RIVERS AND STREAMS.

No instance of pollution of rivers and streams in the district came under notice.

OFFENSIVE TRADES.

There are no offensive trades carried on in the district.

FACTORIES AND WORKSHOPS.

No special workshop industry is established in the district. The general condition of these premises has been satisfactory during the year. The contraventions of the Act have been few in number and of a minor character. No instance came under notice of home work being carried on in unhealthy dwellings, nor was any case of infectious illness found to be associated in any way with out-workers' premises.

The bakehouse workshops within the district are in a satisfactory condition ; the general regulations and special sanitary requirements for these premises are complied with.

Factories, Workshops, Laundries, Workplaces, and Homework.

I.—INSPECTION.

(Including Inspections made by Sanitary Inspector.)

	Inspections.	Written Notices.	Prosecutions.
FACTORIES (Including Factory Laundries).	23	2	—
WORKSHOPS... .. (Including Workshop Laundries).	125	7	—
WORKPLACES	4	—	—
HOMEWORKERS' PREMISES	—	—	—
Total	152	9	—

II.—DEFECTS FOUND.

<i>Nuisances under the Public Health Acts :—</i>	Found.	Remedied.	Prosecutions.
Want of Cleanliness	21	21	—
Want of Ventilation	—	—	—
Overcrowding	—	—	—
Want of Drainage of Floors	—	—	—
Other Nuisances	5	5	—
<i>Sanitary Accommodations :—</i>			
Insufficient	—	—	—
Unsuitable or Defective... ..	3	3	—
Not Separate for Sexes	—	—	—
<i>Offences under the Factory and Workshop Act :—</i>			
Illegal Occupation of Underground Bakehouses (S. 101)	—	—	—
Breach of Special Sanitary Requirements for Bakehouses (SS. 97 to 100) ...	14	14	—
Failure as regards List of Outworkers (S. 107)	—	—	—
<i>Giving out work to be done on Premises which are :—</i>			
Unwholesome (S. 108)	—	—	—
Infected (S. 110)	—	—	—
<i>Allowing Wearing Apparel to be made in Premises Infected by Scarlet Fever or Small-pox (S. 109)</i>	—	—	—
	43	43	—

3.—OTHER MATTERS.

Matters notified to H.M. Inspectors of Factories :—	Number
Failure to affix Abstract of the Factory and Workshops Act (S. 133)	—
Action taken in matters referred by H.M. Inspectors as remedial under the Public Health Acts, but not under the Factory Act (S. 5) :—	
Notified by H.M. Inspector	2
Reports (of action taken) sent to H.M. Inspector	2
Other	—
<i>Underground Bakehouses (S. 101) :—</i>	
In use during 1913	1
<i>Certificates granted :—</i>	
In use at the end of 1910	—

Homework :—

List of Outworkers (S. 107) :—

	Number of	
	Lists.	Outworkers.
Lists received	18	18
Addresses of Outworkers :—		
Forwarded to other Authorities	...	—
Received from other Authorities... ..	18	18
Notices served on Occupiers as to keeping or sending Lists	...	—

Homework in Unwholesome or Infected Premises :— Wearing Apparel. Other.

Notices Prohibiting Homework in Unwholesome Premises (S. 108)	—	...	—
Cases of Infectious Disease notified in Homeworkers' Premises	—	...	—
Orders Prohibiting Homework in Infected Premises (S. 110)	—	...	—
Workshops on the Register (S. 131) at the end of 1913:—			
Workshops and Workplaces (2)	—	...	43
Laundries	—	...	5
Bakehouses	—	...	16
Domestic Workshops	—	...	8
Home Workers	—	...	12

Total Number of Workshops on Register	...	...	84
--	-----	-----	----

Summary of Sanitary Inspector's Work, 1913.

Compiled by Mr. J. Wood, C.R.S.I., Sanitary Inspector.

INSPECTIONS :—

Number of Premises Inspected on Complaint	126
„ „ „ in connection with Infectious Disease... ..	302
Number of Premises under Periodical Inspection	128
„ „ Houses inspected from House to House	287
Total number of Inspections	3295

NOTICES :—

Number of Cautionary Notices served	220
„ „ Statutory Orders issued	7
„ „ Summonses served	1
„ „ Convictions obtained	—

DWELLING HOUSES :—

Number of Houses found to be in a state dangerous or injurious to Health (Section 17)	98
„ „ closed as Unfit for Habitation, H.W.C. Act	3
„ „ made Habitable without Closing Orders	94
„ „ demolished	—
„ „ illegal Underground Dwellings vacated	—

HOUSES LET IN LODGINGS :—

Number Registered under Bye-laws	—
„ of Contraventions... ..	—

COMMON LODGING HOUSES :—

Number Registered under Bye-laws	...	...	...	—
„ of Inspections made	...	...	...	—
„ „ Contraventions...	...	...	...	—

CANAL BOATS :—

Number Registered under Acts	...	...	...	—
„ of Contraventions of Regulations	...	...	...	6

MOVABLE DWELLINGS, TENTS, CARAVANS, ETC. :—

Number observed during the Year	...	...	...	26
„ of Nuisances therefrom abated	...	...	...	6
„ removed from the District	...	...	...	6

BAKEHOUSES :—

Number in District	...	...	...	...	16
„ of Contraventions of Factory Acts	...	...	...	...	15

SLAUGHTERHOUSES :—

Number on Register	...	...	...	...	5
„ of Inspections and Frequency of Inspections (weekly)	...	...	...	...	203
„ „ Contraventions of Bye-laws	...	...	...	...	10

COWSHEDS :—

Number on Register	...	...	...	...	7
„ of Inspections and Frequency (half-yearly)	...	...	...	...	22
„ „ Contraventions of Regulations	...	...	...	...	6
„ „ Milch Cows in District	...	...	...	...	169

DAIRIES AND MILK SHOPS :—

Number on Register	...	...	...	...	32
„ of Inspections and Frequency (half-yearly)	...	...	...	...	94
„ „ Contraventions of Regulations	...	...	...	...	10

UNSOOUND FOOD :—

Number (A) Animals Seized ; (B) Articles or Parcels seized	...	...	...	...	1045
„ Condemned by Magistrates	...	...	...	...	—
„ of Fish seized and surrendered	...	...	...	...	168

ADULTERATED FOOD :—

Number of Samples taken (if any) by the District Authority	...	...	...	...	—
„ Found Adulterated	...	...	...	...	—

OFFENSIVE TRADES :—

Number of Premises in District	...	...	...	...	—
„ „ Inspections made	...	...	...	...	—
„ „ Contraventions of Bye-laws	...	...	...	...	—

WELLS :—

Number, New Sunk...	...	...	...	...	—
„ Cleaned and Repaired	...	...	...	...	—
„ Closed as Polluted	...	...	...	...	—

CISTERNS, ETC., WATER SUPPLY AND SERVICE :—

Number of	Percentage of Houses supplied from Public						
	Supply	..	...	...	...	...	99'9
„	„ Cisterns New, Provided	..	...	...			—
„	„ „ Cleansed, Repaired, Covered				...		15
„	„ Draw Taps placed on Mains	...		...	...		6
„	„ Percentage of Houses supplied on Constant						
	System	...	..	...	...	..	99'9
„	„ Samples obtained from Public Supply Wells						
	(Main Supply)	...	...	...	...		7

WATER CLOSETS :—

Number of Water Closets substituted for dry receptacles	—
„ Repaired, supplied with Water, etc.	88.

DRAINAGE AND SEWERAGE OF EXISTING BUILDINGS:—

Drains.

Number of Houses with Water Closets	...	99.9
„ examined, tested, exposed, etc.	... ..	131
„ unstopped, repaired, trapped	... ..	153
„ Waste Pipes, Rain Pipes disconnected and repaired		41
„ New Soil Pipes or Vent Pipes fixed	... ..	5
„ existing Soil and Vent Shafts repaired	... ..	10
„ disconnecting Traps and Chambers inserted	... ..	2
„ reconstructed	... ..	21

Cesspools.

Number rendered impervious, emptied, cleansed	...	14
„ abolished and Drain connected to the Sewer	.	4
„ of Percentage of Houses draining into Sewer	...	99.9

DISINFECTION :—

Number of Rooms disinfected: (a) ordinary Infectious Disease (138); (b) Phthisis (17)	...	...	155
„ Rooms stripped and cleansed	...	...	32
„ Articles destroyed or disinfected	...	...	—
„ Ordinary Infectious Disease	...	...	904
„ Phthisis	...	...	85

DUST :—

Number of New Bins provided	...	...	...	400.
How frequently is dust removed			...	Weekly
Number of complaints of non-removal	...	...	...	2.
Methods of disposal	...	...	{	Taken to brickfields outside the district.

SUNDRY NUISANCES ABATED:—

Overcrowding	...	...	...	...	...	10
Smoke	...	...	...	...	...	1
Accumulation of refuse	...	...	...	...	...	47
Foul ditches, stagnant water, etc.	...	...	...	...	...	4
Foul pigs and other animals	...	...	...	...	...	5
Dampness	...	...	...	...	...	54
Yards repaired and repaved	...	...	...	...	...	62
Other Nuisances	...	...	...	...	...	242

SANITARY STAFF:

INSPECTOR: J. WOOD, C.R.S.I.

DISINFECTORS (DAVID THOMAS.
EDMUND WILES.

Adoptive Acts in force in the District.

- (1) Infectious Diseases (Notification) Act, 1889.
- (2) Infectious Disease Prevention Act, 1890.
- (3) Public Health Acts Amendment Act, 1890.
- (4) Housing of the Working Classes Act, 1890 (excepting Part IV of this Act).
- (5) Public Libraries Act, 1892 and 1893.
- (6) Public Health Acts Amendment Act, 1907, as to Parts II, III, and IV (except Sections 61 and 66, V, VI, VIII, and X).

The Bye-laws of this Authority, recently revised, are based on the Model Bye-laws of the Local Government Board and relate to—

- (1) Cleansing of Earth Privies, Ashpits, and Cesspools.
- (2) For the prevention of Nuisances arising from snow, filth, dust, ashes, and rubbish, and for the prevention of the keeping of animals on any premises so as to be injurious to health.
- (3) Common Lodging-houses.
- (4) New Streets and Buildings.
- (5) Slaughterhouses.
- (6) Houses let in Lodgings or occupied by members of more than one family, a register of which is now kept.
- (7) Removal of Offensive Matter or House Refuse.
- (8) Keeping of Animals.
- (9) Public Baths and Washhouses.
- (10) Open Spaces.
- (11) Tents, Vans, Sheds, &c.
- (12) Regulations as to Dairies, Cowsheds, and Milk Shops.

Burial Grounds.

The following Table gives particulars of the Burial Grounds in use in the District : —

	THE CEMETERY.	ST. JOHN'S.	PARISH CHURCH.
1.—The Situation of the Ground...	Havelock Road, Southall Green	The Green, Southall	Norwood — No particulars.
2.—Total Area	About 5 Acres	About ½-Acre	
3.—Dates of first use of first entry in Register	April 2nd, 1883	March 3rd, 1860	
4.—Total number of Burials to date	3,512	(Consecrated Jan. 2nd, 1860)	
5.—No. of Vaults...	None	1950	
6.—" Brick Graves	Five	None	
7.—" Earth — Private Graves	332	13	
8.—Length and Width of Grave { Spaces	8-ft. x 4-ft. Brick Grave	577	
9.—Depth of uppermost Coffin below level of Ground ...	7-ft. x 3-ft. Earth Grave	Brick Grave, 8-ft. x 4-ft.	
10.—Area of Unused Ground ...	Four feet	Earth „ 6-ft. 6-in. x 2-ft. 6-in.	
11.—Distance of nearest Dwelling, and whether partially or wholly surrounded by houses	2-thirds	Four Feet	
	20-ft. (partially)	About 1-fifth (see below)	
		Adjoining on North Side North and West Sides	

MEMO.—The ground unused is the front portion of the Churchyard, and is principally brick grave spaces.

TABLE I.

Vital Statistics of whole District during 1913 and previous Years.
SOUTHALL-NORWOOD.

YEAR.	Population estimated to Middle of each year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NET DEATHS BELONGING TO THE DISTRICT.			
		Un-corrected Number.	Net.		Number.	Rate.	of Non-residents registered in the District.*	of Residents not registered in the District.	Under 1 Year of Age.		At all Ages.	
			Number.*	Rate.					Number.	Rate per 1,000 net Births.	Number.	Rate.*
1	2	3	4	5	6	7	8	9	10	11	12	13
1907	24177	—	677	31·2	363	15·0	176	30	54	94·3	217	10·1
1908	24955	—	660	29·4	448	17·5	227	32	63	95·4	221	9·8
1909	23291	—	686	29·4	399	17·1	200	26	65	94·7	225	9·6
1910	24000	—	664	27·6	389	16·2	175	34	63	94·8	214	8·6
1911	23522	—	689	29·2	386	16·3	183	41	81	129·3	244	10·3
1912	25,860	648	660	25·5	382	14·7	199	56	73	110·6	239	9·2
1913	26,736	698	711	26·5	528	19·7	232	78	70	98·4	296	11·0

* Rates in Columns 4, 8, and 13 calculated per 1,000 of estimated population.

Total population at all ages	...	...	26·736
Number of inhabited Houses	...	..	5·284
Average number of persons per House	...	...	5·4

Area of District in Acres (land and inland water), 2575.

TABLE II.
Cases of Infectious Disease notified during the Year 1913.
SOUTHALL-NORWOOD.

NOTIFIABLE DISEASE.	NUMBER OF CASES NOTIFIED.								TOTAL CASES NOTIFIED IN EACH LOCALITY (e.g., Parish or Ward) of the District.				TOTAL CASES REMOVED TO HOSPITAL.
	At all Ages.	At Ages—Years.							1 East Ward.	2 West Ward.	3 L.C. Asylum, Hanwell.	4 St. M'bone Schools.	
		Under 1	1 to 5.	5 to 15.	15 to 25.	25 to 45.	45 to 65.	65 and upwards					
Small-pox.....	—	—	—	—	—	—	—	—	—	—	—	—	—
Cholera	—	—	—	—	—	—	—	—	—	—	—	—	—
Plague.....	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria (including Membran- ous Croup)	45	15	26	2	2	—	—	—	23	21	—	1	26
Erysipelas	8	1	—	—	4	2	—	—	3	4	1	—	—
Scarlet Fever.....	112	22	84	4	2	—	—	—	24	69	3	16	87
Typhus Fever	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric Fever.....	—	—	—	—	—	—	—	—	—	—	—	—	—
Relapsing Fever	—	—	—	—	—	—	—	—	—	—	—	—	—
Continued Fever	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Fever.....	1	—	—	—	1	—	—	—	1	—	—	—	1
Cerebro-spinal Meningitis	—	—	—	—	—	—	—	—	—	—	—	—	—
Polionmyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis	55	—	1	12	35	6	1	—	22	33	—	—	—
Other Tuberculous Diseases.....	32	7	11	7	6	1	—	—	17	15	—	—	—
Totals	253	1	45	122	26	49	9	1	90	142	4	17	114

Isolation Hospital—Name and Situation—Southall-Norwood Isolation Hospital. Number of Diseases that can be concurrently treated ... 2

TABLE III.

Causes of and Ages at Death during the Year 1913.

CAUSES OF DEATH	NET DEATHS AT THE SUBJOINED AGES OF "RESIDENTS," WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT.									TOTAL DEATHS WHETHER OF "RESIDENTS" OR "NON-RESIDENTS" IN INSTITUTIONS IN THE DISTRICT.
	All ages.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and upwards.	
All Causes ..	296	70	23	15	18	15	44	44	67	232
Enteric Fever ..	—	—	—	—	—	—	—	—	—	—
Measles ..	17	6	4	2	4	—	1	—	—	—
Whooping Cough ..	2	1	1	—	—	—	—	—	—	—
Diphtheria and Croup ..	7	—	2	4	1	—	—	—	—	—
Influenza ...	—	—	—	—	—	—	—	—	—	—
Phthisis (Pulmonary Tuberculosis)	22	—	—	1	1	1	13	2	—	27
Tuberculous Meningitis ..	9	1	1	2	4	1	—	—	—	3
Other Tuberculous Diseases ..	1	—	—	—	—	—	1	—	—	7
Cancer, malignant disease ..	25	—	—	—	—	—	6	10	8	13
Organic Heart Disease ..	22	—	—	1	1	—	1	11	9	18
Bronchitis ..	19	5	1	1	—	5	2	1	5	30
Pneumonia (all forms) ..	38	10	10	3	2	—	4	—	—	3
Other Diseases of Respiratory Organs	—	—	—	—	—	—	—	—	—	1
Diarrhoea and Enteritis ..	16	13	3	—	2	—	—	—	—	3
Appendicitis and Typhlitis ..	2	—	—	—	2	—	—	—	—	—
Cirrhosis of Liver ..	2	—	—	—	—	—	—	1	1	—
Nephritis and Bright's Disease	6	—	—	—	—	—	4	1	1	8
Accidents and Diseases of Pregnancy and Parturition ..	1	—	—	—	—	—	1	—	—	—
Congenital Debility and Malformation, in- cluding Premature Birth ..	17	17	—	—	—	—	—	—	—	—
Violent Deaths, excluding Suicide ..	14	1	—	—	2	4	3	1	3	—
Suicide ..	2	—	—	—	—	3	2	—	—	1
Other Defined Diseases ..	71	16	1	1	1	—	6	11	32	118
Diseases ill defined or unknown ..	2	—	—	—	—	—	—	2	—	—
Rheumatic Fever ..	1	—	—	—	—	1	—	—	—	—
	296	70	23	15	18	15	44	44	67	232

